

COUNTY BOROUGH OF ROCHDALE



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
AND
SCHOOL MEDICAL OFFICER

For the Year ending 31st December, 1949

JOHN INNES, M.D., D.P.H.
Medical Officer of Health
and School Medical Officer.

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PUBLIC HEALTH OFFICERS

DECEMBER, 1949

Medical Officer of Health, School Medical Officer,
JOHN INNES, M.D., D.P.H.

Deputy Medical Officer of Health :
NORA MILLS, M.D., D.P.H.

Senior Dental Officer :
H. P. GLEDSDALE, L.D.S.

Assistant Medical Officers :
ALVA A. FORD, M.B.E., M.B., B.S., M.R.C.P.
(M. & C.W.)
MARGARET L. DENNIS, M.R.C.S., L.R.C.P.
(Sch. Med.)

Dental Officer :
R. J. G. YOUNG, L.D.S.

Dental Attendants :
G. PETRIE. V. M. BROWN.
J. M. COCKCROFT.

Lay Administrative Officer :
S. BUTTERWORTH.

Matron, Day Time Nursery :
E. RANKIN, S.R.N., S.R.F.N.

Chief Sanitary Inspector :
A. TURNER, C.S.I.B., A.R.S.I.

Duly Authorised Officers :
W. BEELEY.
W. KERSHAW.

District Sanitary Inspector :
J. GAWTHORPE.

Mental Health Visitors :
HILDA COATES.
JOAN R. LAMBERT.

Meat and Foods Inspector :
J. HAMNETT.

Ambulance Officer :
E. OSBALDESTON

Sanitary Inspectors :
J. PEARSON. T. J. P. HENDRY.
K. E. SMITH. A. HOLT.

Social Worker :
MRS. E. H. WINTER

Superintendent Nursing Officer :
A. HANSBURY, S.R.N., S.C.M., H.V.Cert.

Health Visitors (Tuberculosis) :
M. L. GALLIMORE.
E. M. MOODY.

Health Visitors (Maternity and Child Welfare) :
J. W. MOSELEY. W. REEVE
S. H. BARLOW. F. THORNTON
A. MILLS.

Municipal Midwives :
W. U. CARR. K. E. HAZELDINE.
G. CUSHEN. H. HERNON.
G. DOWD. W. HOLT.
M. C. GROARKE. H. O. MITCHELL.
M. L. HARRISON. K. WHELAN

Superintendent—District Nursing Association :
E. M. FELSTEAD.

PART TIME OFFICERS

Obstetrician and Gynaecologist :
K. A. EVANS, L.R.C.P. & S., L.M., D.R.C.O.G.

Tuberculosis Physician :
ALBERT H. HEYWORTH, M.B., CH.B., D.P.H.

Ophthalmic Surgeons :
PHILIP HARRY, M.D., D.P.H.
R. STEWART SCOTT, M.B., CH.B., D.O.M.S.

E.N.T. Surgeon :
V. T. SMITH, M.D., F.R.F.P.S.

Public Analyst :
S. E. MELLING, F.I.C.

Family Planning Medical Officer :
HELEN E. BARLOW, M.B., CH.B.

To the Chairman and Members of the Health Committee of the County Borough of Rochdale.

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health conditions in the County Borough of Rochdale and the work of the Public Health Department for the year 1949.

The first portion of this Report is as usual statistical in character. The first point to be noted is the Registrar General's estimate of the population which again shows an increase on the previous year, this time of just over 800. Unfortunately, there is still a further decrease in the number of live births and in the birth rate for the year.

The number of deaths and the death rate are both increased as compared with 1948. The death rate is still, however, below the average for the previous ten years.

The infantile mortality rate, although showing an increase as compared with last year, is still the second lowest rate recorded for the Borough.

In contrast with 1948, during which no deaths occurred from causes connected with maternity, three deaths have been recorded in Rochdale this year.

Deaths from all forms of Tuberculosis are by far the lowest on record. It is possible that on the top of a natural decrease there is superimposed the longer survival rate due to the recently adopted techniques in treatment.

Probably the only noteworthy feature in respect of infectious diseases, which were on the whole of average prevalence, was the increase in Scarlet Fever. Any tendency for this disease to resume its previous infectivity and virulence must be carefully watched.

The year under review is the first complete year of work under the National Health Service Act, 1946. It is, however, rather an unsatisfactory year on which to attempt to report. It is true that at the beginning of the year most of the administrative changes had been accomplished. On the other hand, the public had not had restored to it by the new Service what had been taken from it by the removal of the old arrangements.

In last year's Report fears were expressed as to the effect, on the children in particular, of the changeover in Dental and Eye Treatment Sections. These fears have, unfortunately, proved throughout the year to be well-founded. Further comment on this subject is made in the sections dealing with School Medical Services.

In respect of Nursing and Expectant Mothers the new Act lays upon the Local Health Authority the responsibility of providing priority dental attention. Since another Section of the same Act made it far more lucrative for dentists to deal with individual patients this suggestion of priority was immediately made futile. The Local Authority could not maintain its staff of whole-time dentists, nor were the outside dentists interested in undertaking sessions for Local Authority work.

Throughout all the aspects of medicine which are touched by the Local Health Authority's responsibilities, the ever-increasing interest in treatment rather than in prevention, and the absorption of more and more Specialists with treatment as their main if not their sole function, make it increasingly difficult for Local Health Authorities to carry out preventive work.

Prior to the 5th July, 1948, there was in this area a very complete Maternity Scheme which had worked well for many years and had given satisfactory results to all concerned. The complete break-up of this by the National Health Service Act was rendered further distressing by the confusion as to the relative position of the General Practitioner and the Midwife in Domiciliary Midwifery.

The last, but by no means the least, unsatisfactory feature of the year has been the very small number of new houses built. It is true that this is not connected with the National Health Service Act, 1946, but it does come within the Ministry of Health's purview. There are in Rochdale 1,608 families in urgent need of re-housing who have been waiting for more than two years already for a house and will have to wait several more at the present rate of building. There can be no doubt that in preventive and curative medicine, as well as in many other social services, much money and effort is being wasted and will continue to be wasted until the average family has for its exclusive use a reasonably modern house with reasonable facilities in which to exercise parental care.

In many respects, therefore, the year has been an unsatisfactory one and one whose repetition would never be welcomed.

On the other hand, the twelve months under review have been remarkably free from major illness, both in quantity and in quality.

In the narrower sphere of domestic matters and preparation for the future, certain progress has been made.

The Ambulance Service was transferred to its new Station in Drake Street in January and a modified programme of improvement in these premises has been carried out. The only new vehicle added to the fleet was a dual-purpose vehicle, capable of dealing with sitting cases or acting as a light van.

One of the Regional Hospital Board's Mass Miniature Radiography Units was stationed in central premises in the town where it remained from June until the end of December.

In September a Blood Transfusion Campaign was organised by the National Blood Transfusion Service, covering Rochdale and the surrounding districts. In all about 3,000 blood donors were enrolled as a result of the campaign.

A scheme for the vaccination of young children against Whooping Cough was commenced at the Child Welfare Clinics in the Autumn and later extended to include arrangements with the family doctor.

During the year the Daily Guardians Scheme, the future of the Day Nursery and Domestic Help arrangements were all the subject of review, out of which certain minor modifications developed.

In order to overcome the shortage of Health Visitors occurring here as elsewhere, arrangements were made to commence a scheme for Student Health Visitors.

The first students under this scheme started their course of training in October.

The arrangement entered into in October, 1948, with the Manchester Diocesan Council for moral welfare work amongst unmarried mothers and their illegitimate children has worked very well during the year. Practically the whole of the Social Worker's time is taken up by Rochdale cases. By her links with her colleagues in other areas she is able to assist cases whose problems would be difficult of solution on a purely local basis. By the end of the year 101 new cases had been reported upon to the Joint Case Committee.

In the last quarter of the year the previous arrangements for the Public Health laboratory work to be performed at Birch Hill Hospital Laboratory were terminated by the Ministry of Health and such work is now sent to the Public Health Laboratory at Monsall Hospital, Manchester.

In March a commencement was made with a Housing Survey which has as its object the recording, in a convenient filing system, of amenities as well as general conditions of all the houses in Rochdale.

Considerable dissatisfaction has been expressed from time to time with the methods of transporting meat from the depots to retailers' shops in Rochdale. Discussions have taken place with the various interests concerned with a view to improving the type of transport used, and cleanliness of the methods adopted.

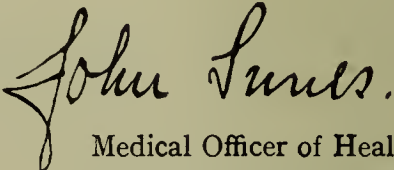
At the end of the year the plans for the Occupation Centre mentioned in last year's Report were approved by the Ministry and alterations to Harefield House were immediately commenced. It is hoped that this building will be ready for occupation by the end of 1950.

In conclusion I have to acknowledge the loyal service of all sections of this Department and the encouragement which the staff and myself have at all times received from you as Chairman and Members of the Health Committee.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,



Medical Officer of Health
and School Medical Officer.

Public Health Department,
8th August, 1950.

STATISTICS.

Year ended 31st December, 1949.

Area (in acres)	9,553
Registrar-General's Estimate of Population, mid-year 1949 ...	88,930
Number of Inhabited Houses (Census 1931)	25,487
Number of Houses on Corporation Estates (December, 1949) ...	4,694
Estimated sum represented by a Penny Rate	£2,190
Rateable Value	£554,617
Estimated expenditure on Health Services provided for by rates ...	£47,434

	Total	M.	F.
Live Births —Legitimate	1,271	645	626
Illegitimate	91	48	43
	<u>1,362</u>	<u>693</u>	<u>669</u>

Birth-rate per 1,000 of the estimated population ... 15.3

Still-births 39—Rate per 1,000 total (live and still) births... 28

	Total	M.	F.
Deaths	1,320	622	698
Death-rate per 1,000 of the estimated population ...			14.8

Deaths from Maternal Causes 3.

Puerperal Sepsis	} Rate per 1,000 total (live and still) births.	2.14
Other Maternal Causes		

Death-rate of Infants under one year of age (56 deaths).

All infants per 1,000 live births	41
Legitimate Infants per 1,000 legitimate live births	37
Illegitimate Infants per 1,000 illegitimate live births	99

	Deaths	Rate per 1,000 of population
Cancer	203	2.28
Tuberculosis (all forms)	19	0.21

VITAL STATISTICS.

Population.

The Census Return of April, 1931, gave the population as 90,278 and in June, 1938, the Registrar General's estimate was 91,290.

The figure of 88,930 is given by the Registrar General as the estimate of the population at mid-year 1949, as compared with the figure of 88,110 for 1948.

Live Births.

1,362 live births (males 693, females 669) were registered as compared with 1,500 in 1948 and an average of 1,308 for the ten years 1939-1948.

The live birth-rate was equal to 15.3 per 1,000 of the estimated population as compared with the figure of 17.0 in the previous year and 20.0 in 1947. The average birth-rate for the ten years 1939-1948 was 15.4 per 1,000.

The 91 births registered as illegitimate accounted for 6.7% of the total births, as compared with 6.3% in 1948 and an average of 7.1% during the previous five years.

Still Births.

39 were registered as compared with 50 in 1948 and an average of 47 in the previous five years.

Deaths.

The deaths registered show an increase with 1,320 (males 622, females 698) as against 1,245 in the year 1948 and 1,399 in 1947.

The death-rate from all causes was 14.8 per 1,000 of the estimated population, as compared with 14.1 in 1948, and an average of 15.6 during the ten years 1939-48.

The chief causes of death are given in comparison with the previous year.

	Year 1949					Year 1948		
Influenza	13	...	2
Tuberculosis	19	...	49
Cancer...	203	...	184
Cerebral Haemorrhage, etc.				188	...	154
Heart Disease	341	...	334
Other Circulatory Diseases	120	...	108
Bronchitis	121	...	94
Pneumonia (all forms)	36	...	24
Nephritis	25	...	24
Congenital Debility, Malformation and Pre-mature Birth, etc....			38	...	37
TOTAL :						1,104		1,010
Percentage of total deaths						83.6		81

Table I Appendix shows comparative mortality rates and birth-rates during the past ten years, while Table II Appendix shows the age and sex distribution, and causes of deaths in 1949.

More important than these total figures and rates are the following facts set out in tabular form :—

Percentage of Deaths in Year Groups, distributed according to age at Death.

Age Group	1911	1921	1931	1941	1949
Under 15 years	31	20	11	8	6
15—45 years	17	15	13	11	5
45—65 years	26	30	32	27	25
65 years and over	25	34	44	53	64

Infant Mortality.

There were 56 deaths registered under one year of age, equal to a rate of 41 per 1,000 live births registered, compared with 57 deaths and a rate of 38 last year. This is the second lowest rate ever recorded in Rochdale.

It is not possible to make any comments on such small alterations as compared with the previous year. It might, however, be noted that in 1948 58% of the infant deaths occurred in the first four weeks of life and in 1949 66% in this neo-natal group.

The average for the ten years 1939-1948 was 56 per 1,000 live births.

The Table given below shows the comparative figures for the previous ten years :—

Year	Deaths Registered	Rate per 1,000 Nett Live Births	Year	Deaths Registered	Rate per 1,000 Nett Live Births
1939	55	55	1944	67	50
1940	96	89	1945	56	44
1941	76	67	1946	75	49
1942	90	71	1947	95	55
1943	58	46	1948	57	38

Comparative Mortality and Birth-rates.

	Death-rate All Causes per 1,000 of population	Live Birth-rate per 1,000 of population	Infant Mortality per 1,000 live births
ROCHDALE	14.8	15.3	41
126 County Boroughs and Great Towns ...	12.5	18.7	37
148 Smaller Towns (Population 25,000 to 50,000)	11.6	18.0	30
ENGLAND AND WALES	11.7	16.7	32

These provisional figures are corrected only for transfer and institutions and make no allowance for variations in the age and sex distribution of the population in different areas.

Infectious Diseases.

The principle infectious diseases (excluding influenza) caused 7 deaths, as compared with 8 last year.

	Year 1949	Year 1948
Measles	4	1
Whooping Cough	—	1
Diarrhoea (under 2 years)	3	4
Cerebro-spinal Fever	—	2
TOTAL :	<u>7</u>	<u>8</u>

Respiratory Diseases.

This group of diseases caused 179 deaths as compared with 139 in 1948. Pneumonia caused 36 deaths (24), Bronchitis 121 deaths (94) and other respiratory affections 22 deaths (21).

Cancer.

Deaths classified to this cause and shown in age groups below numbered 203 (males 84, females 119) as against 184 in the previous year :—

	Total Deaths	Under 15 yrs.	15—45 years	45—65 years	65 yrs. and over
Year 1949 ...	203	1	9	71	122
Year 1948 ...	184	2	11	75	96

The death-rate was 2.28 per 1,000 as against 2.09 per 1,000 of the estimated population for the previous year.

No special investigations have been undertaken during the year in connection with the incidence or causation of this disease.

Morbidity.

It is the intention of the Ministry of National Insurance ultimately to make available to Medical Officers of Health analysed morbidity statistics based upon the sickness benefit claims received in the Ministry's local office.

As the first stage, the Manager of the local office which covers Rochdale and the postal districts of Whitworth and Milnrow, has supplied the total weekly figures of new claims to sickness benefits. Although these are unanalysed it is thought that they may be of use as an index of the general health of the population, showing by means of their fluctuations the effect of any other known local conditions and indicating the onset and progress of seasonal or epidemic illness.

The arrangement and therefore the figures cover the insured persons, that is in effect the working population and excluding children, the aged and many married women.

For 1949 the figures cover only the last three months of the year and are, therefore, scarcely susceptible to comment.

Unemployment.

I am indebted to the Manager of the Rochdale Employment Exchange for information regarding the state of unemployment in Rochdale and the adjoining district of Wardle during 1949. Figures for Rochdale only are not available.

The average number of unemployed persons on the register during the year ended 31st December, 1949, was as follows :—Men 145, Women 45 and Juveniles 13, making a total of 203 persons. The corresponding figures in 1948 were Men 162, Women 32 and Juveniles 12, totalling 206.

I am also informed that at the middle of 1949 there were approximately 55,447 insured persons (30,362 Men, 21,858 Women and 3,227 Juveniles) in employment in the area.

General Provision of Health Services.

Clinic and Treatment Centres.

The hours of clinic sessions and the situation of centres are as shown :—

	Mon.	Tues.	Wed.	Thurs.	Fri.
I.—Maternity & Child Welfare					
(A) St. Luke's School, Deeplish	10—12 noon 2—4 p.m.	—	—	—	—
(B) St. Clement's School Spotland Bridge ...	—	10—12 noon 2—4 p.m.	—	—	—
(C) Council Offices, Norden	—	—	—	2—4 p.m.	—
(D) Baillie St. Council School	—	—	2—4 p.m.	2—4 p.m.	10—12 a.m.
(E) Castleton Wesleyan School, Essex Street	—	—	—	—	10—12 a.m. 2—4 p.m.
(F) Ante Natal (Baillie St. Council School)	10 a.m. to 11-30 a.m. 2—4 p.m.	5-30 to 7-0 p.m.	10 a.m. to 11-30 a.m.	10 a.m. to 11-30 a.m.	—
(G) Post Natal (Baillie St. Council School)	—	—	—	—	2-30—4 p.m.
(H) Family Planning Clinic (Baillie St. Council School)	—	2—4 p.m.	—	—	—
II.—Clinics Provided by the Education Committee—					
(A) Inspection Clinics ...	9—12 noon	—	2—5 p.m.	—	9—12 noon
(B) Treatment Clinics ...	Daily 9—10	30 a.m.			
(C) Eye Clinic	Specialist	Clinics by arrangement			
(D) E.N.T. Clinic					

The work in connection with the Corporation Clinics is set out in detail in the respective sections in this Report.

Home Nursing.

During the year Rochdale continued to carry out its responsibility as a Local Health Authority for Home Nursing through the agency of the Rochdale District Nursing Association.

The Association continues to function as a Voluntary Committee in domestic and many other matters concerned with the welfare of the Nurses' Home and staff. Such liaison and control as is necessary is provided by the presence of members of the Health Committee on the Association's Committee and members of the Association's Committee on the Sub-Committee of the Health Committee which deals with Domiciliary Services.

The Association's Report for the year shows that they nursed a total of 1,902 patients to whom 55,547 visits were paid. The following is a summary of the work done during the year :—

All forms of Nursing.

Patients on the books 1st January, 1949	...	...	...	257
New Patients during the year	...	...	...	1,645
Total Nursed	...	...	...	1,902
Total discharged	...	...	...	1,570
Remaining on books 31st December, 1949	...	...	...	332

Method of Discharge.

Convalescent	...	...	...	...	...	...	...	749
Removed to Hospital	...	...	...	...	...	...	...	263
Relieved	...	...	...	...	...	...	...	284
Died	...	...	...	...	...	...	...	274
Total visits paid to 1,902 patients	...	...	...	...	...	...	...	55,547

Included in the above figures are the following patients who suffered from Infectious Diseases :—

								Patients	Visits
Ophthalmia Neonatorum	...	...	...	...	...	...	...	4	47
Measles	...	...	...	...	...	...	...	6	52
Erysipelas	...	...	...	...	...	...	...	2	19
Puerperal Pyrexia	...	...	...	...	...	...	...	7	113
Pneumonia	...	...	...	...	...	...	...	69	1,070
Tuberculosis	...	...	...	...	...	...	...	12	591
Total	...	...	...	...	...	...	...	100	1,892
Maternity Cases	...	...	...	...	...	...	...	33	462
Children under 5 years	...	...	...	...	...	...	...	163	1,944

Many letters and other expressions of appreciation of the work of the nurses in the homes continue to be received at the Nurses' Home.

At the end of the year the nursing staff of the Association consisted of the Superintendent, one Assistant Superintendent, four fully trained District Nurses and five candidates under training, one Male Nurse and one Male candidate under training and 11 Part-time Nurses.

It is to be noted that the Association's Headquarters at Sparrow Hill are designated as a "Key Training Centre" by the Queen's Institute of District Nursing.

Ambulance Service.

In January the Ambulance headquarters were transferred from Smith Street Old Baths to new premises in Drake Street. During the year various improvements have been carried out at these new premises as experience suggested or as opportunity presented itself. These improvements included increase in the available floor area and the installation of new heating equipment, also the provision of a petrol pump to cut out journeys for refueling.

In August a dual-purpose vehicle was added to the fleet. This vehicle is capable of transporting sitting-cases, particularly of the type attending Fracture Out-patient Departments and at other times is used as a light delivery van.

The fleet now consists of six ambulances, one dual-purpose vehicle and two small cars which are largely used in connection with the Midwifery Service and various Depot and Office duties. The personnel consists of 1 Ambulance Officer, 22 Drivers and Attendants, and 3 Telephonists.

The following table shows the work done by this Service :—

					Borough		County	
					1948	1949	1948	1949
AMBULANCES :								
Journeys	...	...	...	...	6,107	9,943	1,135	258
Mileage	...	...	...	...	43,220*	65,185		2,787
Ordinary Removals (Journeys)	...	...	...	...	6,530*	9,020	—	235
Sudden Illness (Journeys)	...	...	...	...		249	—	—
Accidents (Journeys)	...	...	...	...	712*	674	—	—
Patients carried	...	...	...	...		11,222	—	265
SITTING CASE CARS :								
Journeys...	...	...	...	...		404	—	—
Mileage	...	...	...	...		4,257		
Midwifery Service.								
Journeys...	...	...	...	...	6,791	6,163		
Mileage	...	...	...	...	27,441	23,429	—	—
General Transport.								
Journeys...	...	...	...	...		1,096	—	—
Mileage	...	...	...	...		4,083	—	—
DUAL PURPOSE VEHICLE :								
(as from 15/8/1949).								
As Sitting Case Car—								
Journeys...	...	...	...	...	—	161	—	—
Mileage	...	...	...	...	—	2,756	—	—
Patients carried...	...	...	...	...	—	224	—	—
As General Transport—								
Journeys...	...	...	...	...	—	253	—	—
Mileage	...	...	...	...	—	1,147	—	—

* Includes County Mileage.

Laboratory Facilities.

The Laboratory at Birch Hill Hospital undertook all Bacteriological and Bio-chemical work for this and other Corporation Departments until the end of September. After that date the Bacteriological examination of Milk, Water and Ice-cream from this area was transferred to the Public Health Laboratory at Monsall Hospital, Manchester.

It is also understood that whereas the Local Laboratories will examine specimens from individual patients, the Public Health Laboratory will undertake wider investigations which may arise from these.

During the year a total of 389 reports were received from the Public Health Laboratory. Of this number 45 were reports on Ear, Nose and Throat Swabs, 322 were reports on Faeces, Urine or Blood, in connection with investigations of Typhoid or similar groups and the remaining 22 were duplicates of reports sent to the Infectious Diseases Hospital in the area, mainly for information only.

The chemical analysis of water, as well as of milk and foodstuffs taken under the Food and Drugs Act, is performed by the Borough Analyst.

Hospitals.

The hospital services in the district provide 1,263 beds for patients as shown below :—

Birch Hill Hospital—General Medical and Surgical	...	...	833	beds
do. Maternity	...	...	58	„
Marland Hospital—Infectious Diseases and Chronic Sick	...	...	120	„
Springfield Sanatorium—Pulmonary Tuberculosis (females)	...	...	40	„
Wolstenholme Pulmonary Hospital—Pulmonary Tuberculosis (males)	...	...	53	„
Rochdale Infirmary—General (chiefly surgical)	...	...	109	„
Rochdale Children's Orthopaedic Hospital	...	...	50	„

Maternity and Nursing Homes.

At the end of the year there was one dwelling house registered as a Maternity Home and one as a Nursing Home for medical and surgical cases :—

78 Louise Street—three patients—Maternity ;

183 Drake Street—ten patients—Medical and Surgical.

These Homes were visited during the year by the Medical Officer and were reported upon as satisfactory.

Maternity and Child Welfare

Notification of Births—Public Health Act, 1936.

There were 1,371 births notified as belonging to Rochdale—1,365 by midwives and 6 by doctors. These figures include 768 births occurring at Birch Hill Maternity Home and classified to Rochdale.

Health Visitors.

No change has taken place in the work of the Health Visitors' Section during the year owing to the impossibility of increasing the staff, which at the end of the year consisted of four full-time Health Visitors, together with one performing part-time duties.

At the beginning of the year and to cope with this difficulty the Committee decided to adopt a scheme for the engagement of Student Health Visitors. Three students were appointed in the middle of the year to take up vacancies in Training Centres early in 1950. When they return to us as fully trained Health Visitors it will be possible to consider expansion of their work beyond the bare essentials which it is possible to cover at the moment.

Closer liaison between the Health Visitors' Section and other sections of the Department was provided for by the appointment of Miss A. Hansbury, S.R.N., S.C.M., H.V. Cert., as Superintendent Nursing Officer in March.

The Health Visitors have made a total of 11,626 visits mainly to children under five (9,263 visits) and to expectant mothers (245 visits). The Health Visitors are also in regular attendance at the Welfare Centres, Nursery Schools and Day Nursery.

Classification of visits made by Health Visitors :—

Primary visits to births	...	...	...	...	...	1,385
Primary visits re stillbirths	...	...	...	...	...	14
Subsequent visits to infants under 1	...	...	...	...	...	2,089
Subsequent visits to infants and young children—1—2						
years	...	...	...	...	...	1,867
Subsequent visits to young children—2—5 years	...	...	...	...	...	3,908
Ante-natal cases	.....	...	...	...	...	245
Daily Guardians	...	...	...	...	...	172
Infants deaths	...	...	...	...	...	37
Infectious Diseases (Puerperal Pyrexia and Ophthalmia						
Neonatorum)	...	...	...	...	...	18
Castleton Day Nursery	...	...	...	...	...	125
Industrial Nurseries	...	...	...	...	...	6
Incomplete visits	...	...	...	...	...	1,572
Home and Domestic Helps	...	...	...	...	...	170
Complaints	...	...	...	...	...	18
						<hr/>
						11,626
						<hr/>

Child Welfare Centres.

The five centres in different parts of the town have continued with their nine weekly sessions. Again owing to shortage of both Health Visitor and Medical Officer staff no changes could be made in the general arrangements during the year.

The following Table shows that attendances at these Clinics are reduced as compared with 1948, although not so much reduced as were the 1948 figures compared with 1947.

Centre	New Cases admitted during 1949	Total Attendances of Children			Average Attendance per Clinic Session	No. of Medical examinations by M.O.
		under 1 yr.	1—2 yrs.	2—5 yrs.		
(a) Baillie Street * (Wardleworth)	123	1,878	720	386	† 32 (42)	991
(b)*St. Luke's ...	254	4,059	904	481	56 (55)	1,613
(c)*St. Clement's ...	180	3,602	984	827	53 (54)	1,586
(d) Baillie Street *(Castleton) ...	160	2,718	639	333	37 (41)	1,036
(e) *Castleton ...	102	1,682	619	687	32 (42)	741
(f) Norden ...	54	803	296	322	28 (25)	399
Totals ...	873	14,742	4,162	3,036	—	6,366
Corresponding Figures 1948 ...	950	16,433	5,306	2,899	—	5,784

* Two Clinic Sessions per week. † Figures in brackets are for 1948.

The Medical Officers' examinations actually increased from 5,784 to 6,366. The number of children who attended for the first time and who at the date of their first visit were under one year of age was 811 or 59% of the notified live births, as against 60% in 1948.

It is considered that the main reason for these decreases is the reduced staff of Health Visitors. They have had too little time to keep in close touch with the families in their districts. On the other hand it must also be remembered that the number of births is considerably reduced as compared with previous years.

One factor which must be remembered is the growth of Nurseries in factories and mills in the town. At the end of the year there were 376 children under five accommodated at 9 Nurseries as compared with 146 children under five accommodated at 3 Nurseries at the end of 1947.

In the early part of the year there was a moderate number of cases of Measles amongst the infants attending the Clinics, but on the whole, the general standard of well-being has been maintained.

Medical records of children attending these clinics are subsequently transferred to the School Medical Services Clinic with which close liaison continued for such things as regular dressings, dental treatment and for conditions of the Ear, Nose and Throat, and Eyes.

The members of the Ladies Executive Committee and co-opted voluntary helpers have continued to render very valuable and pleasant assistance at the clinics.

Orthopaedic Clinic.

Children suffering or suspected of suffering from Orthopaedic and postural defects continued to be sent to the Smith Street Clinic now maintained by the Rochdale and District Hospital Management Committee.

In mid-year Dr. Bateman retired from practice in the town and at the same time severed his very long connection with the Cripple Children's Union. His long and close association with the work of this Department and the School Medical Department is very much missed. For many years the staff in this Department had relied upon his advice and a very large number of children derived great benefit from treatment, both as out-patients and as in-patients, under his care.

At the end of the year the Hospital Management Committee's arrangements for continuing this work were nearing completion.

Other Clinics.

Full use has been made of the ready services of Dr. Heyworth, Chest Physician, in the examination of children with any family history or suspicion of Tuberculosis.

At the request of Dr. Evans, Consultant Obstetrician and Gynaecologist, all mothers attending for the first time with a baby are strongly urged to attend the Post natal Clinic.

Children requiring Specialist opinion and treatment are referred through the School Medical Department. This arrangement includes those with defects of the Ear, Nose and Throat, or of the Eye.

National Society for the Prevention of Cruelty to Children.

The work of this Society has again been found to be of great value and the Department acknowledges the assistance given by the Society's Local Inspector, Mr. Mitchell. Further details of this work will be found in the School Medical Report.

Provision of Milk and Food Preparations.

Now that the National Welfare Foods Scheme has become well established, the demand upon the Local Health Authority for the distribution of milk and food preparations is very much reduced and is largely confined to special cases.

Closest contact is maintained between the Maternity and Child Welfare Clinics Services and the Welfare Foods Office. The Clinics are utilised as distribution centres with staff allocated from the Welfare Foods Office.

Diphtheria Immunisation.

During the year 1,204 children under five received a course of immunisation. In 1948 the number immunised in this group was 1,049 and in 1947 it was 835.

The following Table shows immunisation in relation to child population under five years :—

Age at 31/12/49 i.e. born in year	under 1 1949	1 1948	2 1947	3 1946	4 1945
Number immunised	299	663	812	869	652
Estimated mid-year child population 1949	Children under five 6,831				

It does not appear that the scare of an actual Diphtheria epidemic is any longer necessary to foster interest in immunisation. The cumulative effect of Health Education and general and particular propaganda has now established this form of immunisation as part of the routine progress of the child.

A further mention of the scheme is made in the sections dealing with Infectious Disease and School Medical Services.

Immunisation against Whooping Cough.

The discussions foreshadowed in last year's Report on the subject of the establishment of a scheme for immunisation against Whooping Cough ultimately took place and the Health Committee decided to adopt such a scheme commencing in September. They were brought to this decision by consideration of the stage which had been reached in the production of a satisfactory immunising agent and secondly by the increasingly frequent requests being received for this form of protection to child life.

The scheme having received the approval of the Ministry of Health, a commencement was made through the Child Welfare Clinics in September. At the end of the year the scheme was extended to include immunisations carried out by the family practitioner on the same basis as Diphtheria immunisation.

During the year full immunisation courses of three injections were given to 194 children.

Ante-Natal and Post-Natal Clinics.

No change was made in the arrangements with regard to these Clinics during the year, but since the Ante-natal Clinic at Birch Hill Hospital is now entirely outside the purview of the County Borough, both in its administration and in the patients who attend there, reference to that Clinic is omitted from this Report.

The Local Authority's Clinics are, therefore, all held at Baillie Street Council School—two routine Ante-natal Clinics, two Specialist Ante-natal Clinics, together with one Specialist Post-natal Clinic each week.

Agreement as to the division of responsibility for these Clinics was reached early in 1950 and that, together with some alterations in the working of the Clinics, will be reported upon in the next Annual Report.

In the meantime, it may be said that the Ante-natal Clinics serve three separate and distinct functions. First, they provide for routine Ante-natal supervision either in place of, or in addition to, the supervision to which the expectant mother is otherwise entitled. Secondly, they provide for consultation upon cases referred from the routine Clinics, from Midwives, or from General Medical Practitioners in the area. Thirdly, they act as a booking centre for Maternity Hospital beds. The last is important at the moment since admissions are, due to staff shortages, limited to priority cases and must qualify either on medical grounds or in respect of unsatisfactory housing.

The number of women attending these Clinics is set out in the following summary :—

		Rochdale Borough		County Districts		Total	
		1949	1948	1949	1948	1949	1948
(1) ANTE-NATAL CLINICS							
(a) No. of Expectant Mothers attending (New Cases) ...	Baillie St.	758	911	113	139	871	1,050
(b) No. of attendances (Old and New Cases) ...	Baillie St.	5,467	5,816	966	803	6,433	6,619
(c) Average attendances per clinic session ...	Baillie St.	26.8	24.0	4.7	3.3	31.5	27.3
(2) POST-NATAL CLINIC							
(a) No. of Mothers attending (New Cases) ...	Baillie St.	387	291	85	49	472	340
(b) No. of attendances (Old and New Cases) ...	Baillie St.	418	327	87	55	505	382
(c) Average attendance per clinic session ...	Baillie St.	8.5	6.6	1.8	1.1	10.3	7.7

The 758 Rochdale patients who attended for the first time at the Ante-Natal Clinics during the year represented 54% of the total notified live-births and still-births in this Borough, as compared with 60% in the previous year. In following up these patients the Health Visitors paid 245 home visits.

Laboratory and other Facilities.

As part of the background of the Consultant Section of the Clinics, all the facilities provided at Birch Hill Hospital, including X-ray and Laboratory Departments, are available to patients attending these Clinics. In particular the Laboratory staff attends certain Ante-natal Clinics in order to carry out blood examinations on new cases. During the year 1,178 hæmoglobin estimations were performed.

Consultant Services.

Dr. K. A. Evans, Consultant Obstetrician to this area, continued to be in charge of the Specialist Clinics and of the Maternity beds, as well as being available for consultation in the Domiciliary Specialists Scheme.

Emergency Maternity Unit.

Under arrangements made by the Rochdale and District Hospital Management Committee this Unit, based at Birch Hill Hospital, is available on call at all times within the Hospital Committee's area. The Service was called upon twice during the year.

Maternity Home.

There were 801 maternity cases admitted to the Maternity Home at Birch Hill Hospital from the County Borough area, as compared with 831 in 1948. The actual number of Rochdale women confined was 791 as compared with 819 in 1948. The number of babies born in the Maternity Home and classified to Rochdale was 768 live births and 23 still-births, as compared with a total of 785 in the previous year.

DOMICILIARY MIDWIFERY SERVICE.

The responsibility for maintaining an adequate Domiciliary Midwifery Service remains with the Local Health Authority. No modification of the scheme in Rochdale has, therefore, been necessary, except that the cost of the Service is no longer reclaimed, either in whole or in part, from the mothers concerned.

Midwives.

11 midwives gave notice during the year of intention to practice in this Borough, 10 of whom were engaged as Municipal Midwives, while the remaining one was engaged in private practice. Comparative figures of the year's district midwifery work by Municipal Midwives are given in the following table :—

	Year 1949	Year 1948	Year 1947
Cases attended—as Midwife	474	610	792
as Maternity Nurse...	94	50	60
Visits during laying-in period—			
as Midwife	7,878	9,542	12,022
as Maternity Nurse	606	344	399
Ante-natal (Home Visits)	2,493	2,043	2,085
Miscellaneous Visits—Ante-natal			
Clinic, etc.	116	243	129

The one midwife in private practice attended 68 cases as midwife during the past year and none as maternity nurse.

During the year the staff of Municipal Midwives was maintained at the establishment of ten. It would appear from the above table that this establishment may have to be reviewed in the future if the present tendencies with regard to the birth rate in the borough continue. In 1947 nine midwives attended 792 cases with an average of 88 cases per midwife in addition to those which she attended as maternity nurse. In 1949, on the other hand, ten midwives were only called upon to attend an average of 47 cases each, in addition to an average of 9 cases each as maternity nurse.

A car service is operated from the Ambulance Depot in connection with the Municipal Midwifery Service and these cars are also used for the transport of Gas and Air Analgesia equipment as required by the midwives.

Nine of the midwives on the staff are now qualified to administer Analgesia and during the year 217 women have been given this form of relief from pain in childbirth.

Medical Assistance.

Midwives practising in the District requested the services of a medical practitioner in 90 maternity cases and in 25 cases of newly born children. The corresponding figures last year were 204 and 56 respectively.

Since July, 1948, the Local Health Authority has been responsible for paying the medical fees only where the general practitioner is not already called upon to give these services to the patient under the terms of his contract with the Local Executive Council. During the year the number of cases concerned was 19, involving an expenditure of £67.

Maternity Outfits.

No loans of Maternity Outfits for confinement at home were made during the year. Sterilised accouchment outfits may be obtained at the Child Welfare Centre free of cost.

Dental Service.

It had not been found practicable by the end of the year to make new or more complete arrangements for the dental care of expectant and nursing mothers, and of children under the age of five years. The arrangements between the Health and Education Departments for the services of school dental staff in this direction were continued, but this only resulted in the dental treatment of 5 expectant and nursing mothers, and 34 children under 5 years.

Puerperal Pyrexia.

Two cases of Puerperal Pyrexia were reported, neither of whom were removed to Marland Hospital for treatment. Both made a satisfactory recovery. During the previous year six cases were reported.

Maternal Mortality.

During the year three deaths were recorded as due to maternal causes with a maternal death rate of 2.14 per thousand live and stillbirths. No deaths were recorded in this group during 1948, but in 1947 there were four deaths with a maternal mortality rate of 2.25 per thousand.

This year's experience indicated the wisdom of treating the previous year's experience as largely a happy incident in the maternal mortality records of the district.

In two out of three cases there appeared to be as full co-operation and as satisfactory progress as could reasonably be expected and yet, in all three cases, and for an entirely different reason in each case, sudden and serious developments occurred late in pregnancy which did not respond to skilled attention with adequate facilities.

It is true that the remaining case exhibited practically every bad example which can be shown in a scheme for dealing with maternity cases. Yet from every practical standpoint two of these three deaths must be regarded as unavoidable.

The following figures show the Maternal Mortality rates per 1,000 live and still-births in other towns as compared with Rochdale :—

AREA	1949	1948	Average 5 years 1943-47
ROCHDALE	2.14	0.00	2.66
Average 12 neighbouring manufacturing towns ...	.90	1.18	1.93
Administrative County of Lancaster ... ..	.96	1.06	1.98
England and Wales ... ..	.98	1.02	1.72

Ophthalmia Neonatorum.

One case was reported during 1949 as against four in 1948 and three in 1947. This case showed no impairment of vision.

CASTLETON DAY NURSERY.

The number of children on the register in January was 64 and in December 65, as compared with 64 and 65 respectively in the previous year.

The Nursery has accommodation for 60 children and the staff comprises :—

1 Matron ; 1 Assistant Matron (Trained Nursery Nurse) ;
6 Assistant Nurses ; 9 Student Nurses.

With the exception of seven children who had Measles in January, there was no marked absenteeism because of Infectious Diseases during the year.

The average daily attendance was 56.

Medical inspections were carried out regularly in rotation with the Nursery Schools. All the children inspected were found to be quite healthy and their standard of nutrition very good. Only one child was found early in the year to be of poor nutrition, but on subsequent examinations it had greatly improved and was upgraded to the 'average' nutrition category.

Out of 191 medical inspections made during the year 105 infants were found to be of good nutrition, 85 average nutrition and 1 poor nutrition (subsequently upgraded).

38 children were referred for special treatment as compared with 17 in 1948. Details are as follows :—

Ear, Nose and Throat	...	...	...	...	...	14
Eye conditions (squint)	...	...	...	...	...	1
Orthopaedic	...	...	...	...	...	11
U.V.R. Treatment	...	...	...	...	...	3
Dental Caries	...	...	...	...	...	6
Medical Specialist	...	...	...	...	...	3

The infants were found to be fairly free from infestations of nits and vermin. Only nine heads were found to have nits amongst all those inspected.

As in all Nursery Schools, Diphtheria Immunisation was carried out for all new entrants.

A Health Visitor is in attendance at all inspections and maintains a friendly contact with the Matron, thus securing a greater liaison with the Nursery and the Health Visitors' District work.

The Matron maintains contact with the parents on matters relating to the health and care of the children.

DAILY GUARDIANS SCHEME.

This Scheme was continued as part of our proposals under the National Health Service Act, but it was due to be reviewed in 1949. The Committee were not entirely satisfied that the continuation of this Scheme was necessary, particularly in so far as its financial implications are concerned. The matter was, however, full discussed with representatives of the Ministry of Health. The Ministry's decision after these discussions was that the time was not yet opportune for any major alterations in any Welfare Schemes which had or were likely to have any direct effect upon the employment of females in industry. The Scheme is, however, to be re-examined in 1950.

At the 31st December, there were 324 persons registered as approved guardians to take 386 children.

CONVALESCENT HOMES.

As part of their arrangements for Care and After-care, the Health Committee have authorised that arrangements be made for Convalescent Home accommodation. During 1949 such accommodation was arranged for 60 adults and 7 children as follows :—

						Adults	Children
West Hill, Southport	...	...	...	...		24	—
Grey Court, Hest Bank	...	...	...	...		19	—
Parkside, Arnside	...	...	...	...		10	—
Others	...	...	...	...		7	7
						60	7

In practically all the cases the period of accommodation recommended is two weeks. On recommendation from the Convalescent Home concerned nine cases received extensions of one or more weeks.

The total cost of Convalescent accommodation was £205 12s. 6d. of which £69 4s. 7d. or 33.65% was recovered.

In addition, travelling expenses were paid in the cases of three adults and two children, the amount involved being £8 3s. 2d.

DOMESTIC HELP SERVICE.

The Scheme commenced in 1947 and continued with little modification under the National Health Service Act. It has been modified in only one essential during the year. The appointment of a Superintendent Nursing Officer, already referred to, allowed this Scheme to come more closely under trained nursing supervision.

In theory this should provide for the switching of the limited resources of Domestic Helps from the less urgent to more urgent cases. Unfortunately, in practice it is found that a considerable number of the persons who seek the assistance of this Service require this assistance practically full-time and continuously over a long period of time. Many of them are chronically sick persons awaiting long-delayed admission to Hospital. On the other hand, many of them definitely prefer to remain at home rather than enter Hospital with the prospect of a break-up of their homes. Neither the present system of hospitalisation of the chronic sick, nor the present practice under the Domiciliary Domestic Help Service is a completely satisfactory answer to these problems. It is hoped, however, that early next year we shall see fresh developments in the Geriatric Services of the Rochdale and District Hospital Management Committee, which Services are designed to put the aged sick more nearly on the same basis as the ordinary sick person and to make better use of the beds set aside for 'non-acute' sick.

During the year the Domestic Helps assisted 218 cases (50 cases of maternity and 168 of general sickness, etc.) as against 105 cases during 1948. The average period over which assistance was given was 19 days for maternity cases and 68 days for general sickness.

At the end of the year 29 Domestic Helps were employed, but this number is still not sufficient to meet fully the steadily increasing demands made upon the Service.

It was not necessary during the year actually to refuse any applications for assistance, although on many occasions only bare requirements could be met and those with some difficulty.

MENTAL HEALTH SERVICE.

By virtue of the National Health Service Act, 1946, the County Borough of Rochdale as a Local Health Authority became responsible for the ascertainment and community care of mental illness and mental defectiveness to the same extent as it is responsible for physical illness. This Authority has no responsibility for providing hospital or institutional accommodation for mentally ill persons or mental defectives. That responsibility rests upon the Regional Hospital Board.

Particulars of Mental Defectives as on 31st December, 1949 :

		M.	F.	T.
		<hr/>	<hr/>	<hr/>
1. (a)	In Institutions (including Under 16 yrs. of age...	8	3	11
	cases on licence therefrom) Aged 16 yrs. and over	47	33	80
(b)	In "places of safety"	6	14	20
(c)	Under Statutory Super- Under 16 yrs. of age...	10	5	15
	vision (excl. cases on Aged 16 yrs. and over	15	5	20
	licence)			
2.	Under Voluntary Supervision Under 16 yrs. of age...	4	0	4
	Aged 16 yrs. and over	12	6	18
		<hr/>	<hr/>	<hr/>
	Total ...	102	66	168
		<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

Particulars of Cases Reported during the year 1949 :

1. ASCERTAINMENT :

(a)	(i)	Under Education Act, 1944,						
		Section 57 (3)	3	2	5			
	(ii)	Under Education Act, 1944,						
		Section 57 (5)	2	4	6			
		On leaving special schools ... 1 1 2						
		On leaving ordinary schools ... 1 3 4						
(b)		Other ascertained defectives reported and found to be "subject to be dealt with"	2	1	3			
(c)		Other reported cases ascertained who are not at present "subject to be dealt with"	4	0	4			
			<hr/>	<hr/>	<hr/>			
Total		number of cases reported during the year	11	7	18			
			<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>			

2. DISPOSAL OF CASES REPORTED DURING THE YEAR :

(a) Ascertained defectives found to be "subject to be dealt with" :—	M.	F.	T.
(i) Admitted to Institutions	1	0	1
(ii) Placed under Statutory Supervision	6	7	13
	—	—	—
Total ascertained defectives found to be "subject to be dealt with"	7	7	14
	==	==	==
(b) Cases not at present "subject to be dealt with" :—			
(i) Placed under Voluntary Supervision	3	—	3
(ii) Action not yet taken	1	—	1
	—	—	—
Total cases not at present "subject to be dealt with" ...	4	—	4
	==	==	==
Number of Mental Defectives in Institutions under community care including voluntary supervision, or in "Places of Safety" who have ceased to be under any of these forms of care during 1949.			
	M.	F.	T.
1. (a) Ceased to be under care	8	5	13
(b) Died, removed from area, or lost sight of	21	12	33
	—	—	—
Total ...	29	17	46
	==	==	==

The 91 cases noted as "in Institutions" are spread over twelve different Institutions, but are mainly in Brockhall Institution, Calderstones Hospital and the Lancaster Royal Albert Institution.

The 20 cases noted as being "in places of safety" are in Birch Hill Hospital.

Six of these cases were at the end of the year on licence from the parent Institution.

In addition to one case admitted to an Institution at the request of the parent, another admission was effected through the Courts.

The shortage of accommodation, mainly due to the staffing position, continues and all urgent cases other than those dealt with through the Courts have to be placed on a regional waiting list.

Reports on Home Conditions for Institutions.

156 visits were made in connection with Licence Reports, Holiday Licence Reports and Reports for the Visitors under Section II of the Mental Deficiency Act, 1913.

Cases under Supervision.

The Report shows that there was at the end of the year a total of 57 cases under Community Care, 35 under Statutory Supervision and 22 under Voluntary Supervision. The Mental Health Visitors paid 801 visits during the year to all these supervision cases.

Of the 57 cases, 28 are in employment and 16 are under 16 years of age, leaving only 13 who may be regarded as unemployed.

During the year one Statutory Supervision case died and one Voluntary Supervision case gave birth to an illegitimate child.

During the year the list of patients under any form of supervision has been revised and by the end of the year all on the list were known to be in need of supervision. A number of the people on the lists submitted to us from the South East Lancashire Association for Mental Welfare as Defectives had not been visited since before the war and, in the meantime, had married and had children. It was felt to be inadvisable to disturb these people who had managed their own lives in a satisfactory manner for so many years. Others had removed from the addresses given. Every clue was followed up in an effort to trace these cases, but in several instances without success and it can, therefore, only be presumed that they had long since left the town altogether. Other cases are known to have left Rochdale. Altogether there were 45 such cases and their records are still retained for future reference should any of them need the attention of the Department. In the cases of those who are known to have left the town, the records have been passed on to the appropriate Authority.

Assistance.

The provision of cheap milk, in some cases free, has been arranged for in the cases of children under 16 years, also for the unmarried mother who received in addition free orange juice, baby food and vitamin tablets.

Ten of the unemployed are in receipt of allowances from the National Assistance Board. Clothing grants have been obtained in several cases where need has arisen. Money vouchers have also been granted by the British Legion to patients in need.

We have been very successful in our drive for cast-off clothing, which is distributed among our patients. This has been greatly appreciated, especially in families where there are several young children.

Treatment.

Arrangements have been made for several patients to see Specialists and as a result treatment has been obtained such as Physio-therapy, Speech Therapy and Deaf Aids.

This year has seen the establishment of the Mental Deficiency Services on a local basis. Previously the work was done from a distance and suffered greatly from shortage of staff during the war years. During this year parents have begun to accept and recognise the help and advice we can give and now will seek us out if troubles arise.

The number of mental patients normally resident in Rochdale and who were in Mental Hospitals on the 31st December, was as follows :—

				Males	Females
In General Mental Hospitals ...	...	...	...	81	129
In Designated Mental Hospitals	...	...	...	19	25

**Number of Patients Removed for Treatment to Mental Hospitals During
the Year 1949.**

Mental Hospitals for Treatment	Admissions	Transfers to other Hospitals	Patients disch. as Relieved	Patients disch. as Recovered	Deaths
Prestwich	19	—	11	11	3
Whittingham	5	1	3	2	3
Lancaster Moor	9	—	—	7	1
Parkside, Macclesfield	—	—	—	—	—
Rainhill	—	1	—	—	1
Winwick	1	—	1	2	1
Cheadle Royal	2	—	—	1	—
The Retreat, York ...	1	—	—	1	—
Total :	37	2	15	24	9

Designated Mental Hospitals for temporary detention, observation periods and for aged patients	Admissions	Transfers to other Hospit'ls	Patients not Cert. and Disch.	Patients Disch. Re-lieved	Patients Disch. Re-covered	Deaths
Birch Hill	24	10	4	1	1	8
Boundary Park	2	—	—	2	—	—
Burnley General	3	3	—	—	—	—
Fairfield, Bury	1	1	—	—	—	—
Wesham Park, Kirkham	4	2	—	1	—	—
Barony, Nantwich	1	—	—	1	—	—
Sharoe Green, Preston...	2	—	—	1	—	1
Total :	37	16	4	6	1	9

Mental Health Clinic. (Oldham Royal Infirmary).

During the year 22 patients were sent to this Clinic through the Mental Health Service. Several other Rochdale patients attended the Clinic by private arrangement. Patients who first seek the services of the Duly Authorised Officers have their neurological histories built up and these are placed in the hands of the Psychiatrist before interview with the patient. The patient's own doctor is also advised to forward a letter expressing his opinion of the patient.

Transport is provided for patients who are physically incapable of travelling or when their mental state requires it.

The Clinic is now the main source for the admission of Voluntary patients to the Mental Hospitals for treatment.

The use made of the Psychiatric Clinic by out-patients has gradually increased during the year with a resulting lengthening of the waiting period for appointments. This now extends to four weeks and upwards. More enquiries are now being received from General Practitioners and from prospective patients who are realising more readily that early advice and treatment are essential where mental disease is concerned.

Those Mental Hospitals which on the 5th July, 1948, commenced their own Psychiatric Workers Service have now practically ceased to operate such a service. This work is now almost entirely placed in the hands of the Duly Authorised Officers of the Local Health Authorities. The Medical Superintendents of Private Mental Hospitals (Cheadle Royal, etc.) have expressed great appreciation of the Psychiatric work completed for them.

Mental Hospital Accommodation.

It would appear that for some considerable time there will continue to be lack of proper accommodation for certifiable patients, as well as a shortage of accommodation for those cases of Senile Dementia which are not certifiable under the Lunacy Acts. There is only one hospital in Lancashire which is providing for the latter group at the present time (Sharoe Green Hospital, Preston) and this is now overcrowded. No patients are admitted thereto unless they are over 70 years of age. On the other hand, Mental Hospitals seldom care to admit a patient over 60 years of age. There is thus developing a tendency to regard Senile Dementia patients as coming within the functions of a Local Authority's Welfare Services.

It would appear that discussions will have to take place in respect of the dividing line between the responsibilities of the two Services for these cases just as they have so frequently taken place in the past in respect of the dividing line in chronic physical sickness. This earlier problem which has been with us for a much longer period is still largely unsolved and it would appear that both ultimately depend upon the provision of more accommodation and either the staffing of more beds or better distribution of the available staff.

The difficulty of obtaining admission for a senile patient showing no evidence of Dementia into a Chronic Sick Ward has had the unfortunate result of causing the General Practitioner to send this type of patient to the Duly Authorised Officer as a mental patient. The anxiety of the family doctor to obtain some accommodation for his patient, often for the sake of the sorely tried relative as well as the patient's own sake, is understood. Such action, however, falls outside the purposes for which the Lunacy Acts exist.

PREVALENCE OF INFECTIOUS DISEASES.

During the year infectious diseases as a whole showed little variation from the previous year and indeed the average for the preceding five years. On the other hand, there were definite variations in the figures in respect of individual diseases.

Scarlet Fever although by no means of epidemic proportions was definitely more prevalent than in the last year or two. Diphtheria, with three notified and confirmed cases, continued the downward trend shown by this disease over the last five years. The notifications of Tuberculosis show a considerable increase as compared with recent years. It is thought, however, that this increase is mainly due to the visit during the year of the Mass Miniature Radiography Unit, to which reference will be made in the section dealing with Tuberculosis. Measles, which showed a considerable increase in incidence in February, March and April, died down completely by the end of May. From then on to the end of the year there were practically no further cases.

The notifications of the various diseases totalled 1,188 as against 1,163 the previous year and an average of 1,149 during the five years 1943-1947. Comparative figures are given in the following summary :—

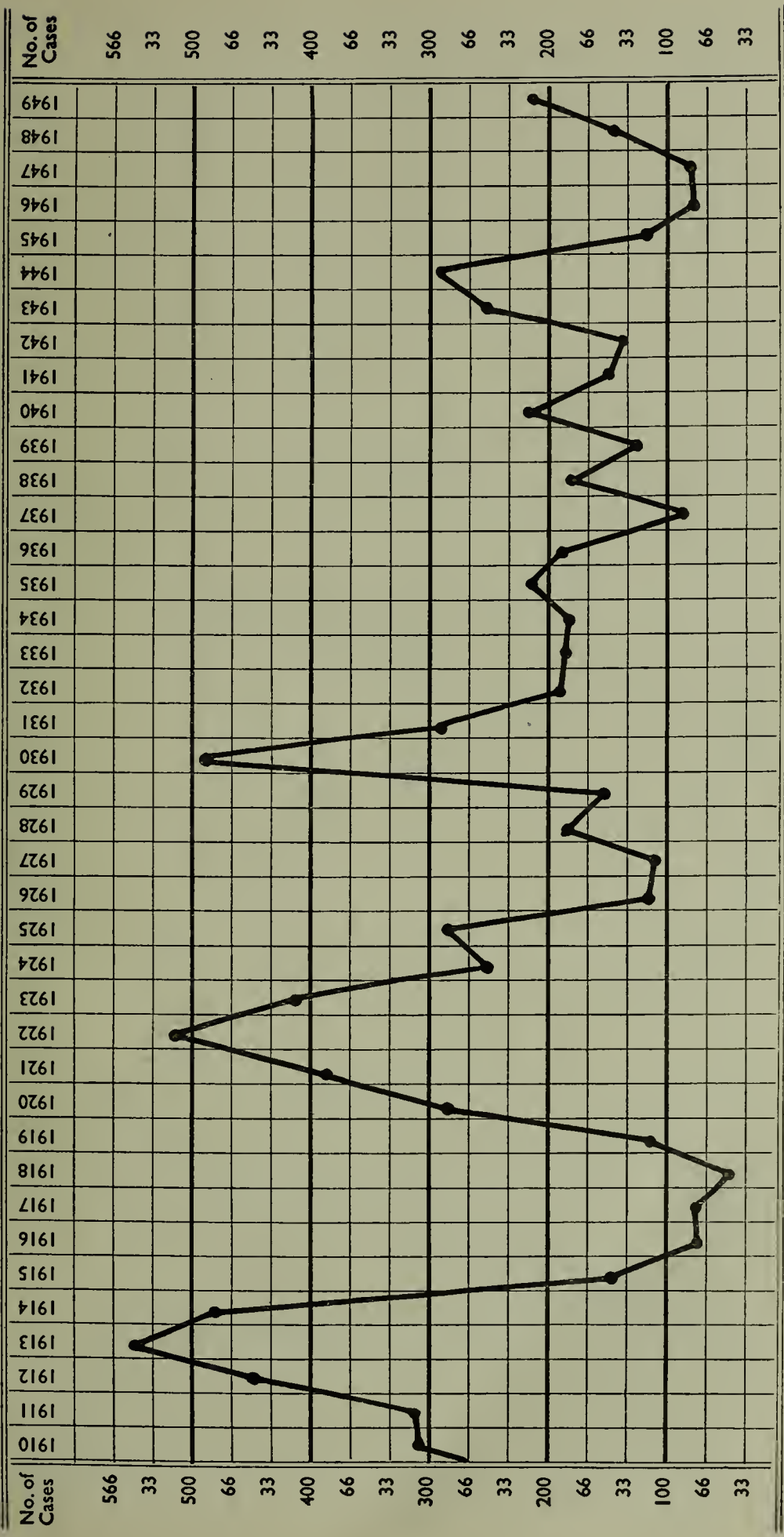
				1949	1948		Average 5 yrs. 1943-47
Scarlet Fever	...	...	...	205	134	...	161
Diphtheria	...	...	...	3	8	...	44
Tuberculosis	...	...	...	152	103	...	99
Pneumonia	...	...	...	27	18	...	30
Whooping-Cough	...	...	...	142	206	...	182
Measles	...	...	...	594	641	...	509
Chicken Pox	...	...	...	31	5	...	84
C. S. Meningitis	...	...	...	3	4	...	5
Poliomyelitis	...	...	...	3	6	...	1
Other Diseases	...	...	...	28	38	...	34
				1,188	1,163	...	1,149

In addition to the above formal notifications the following cases of infectious diseases were brought to the notice of the Department, chiefly through the medium of schools :—Whooping-Cough 14, Measles 40, Chicken Pox 45.

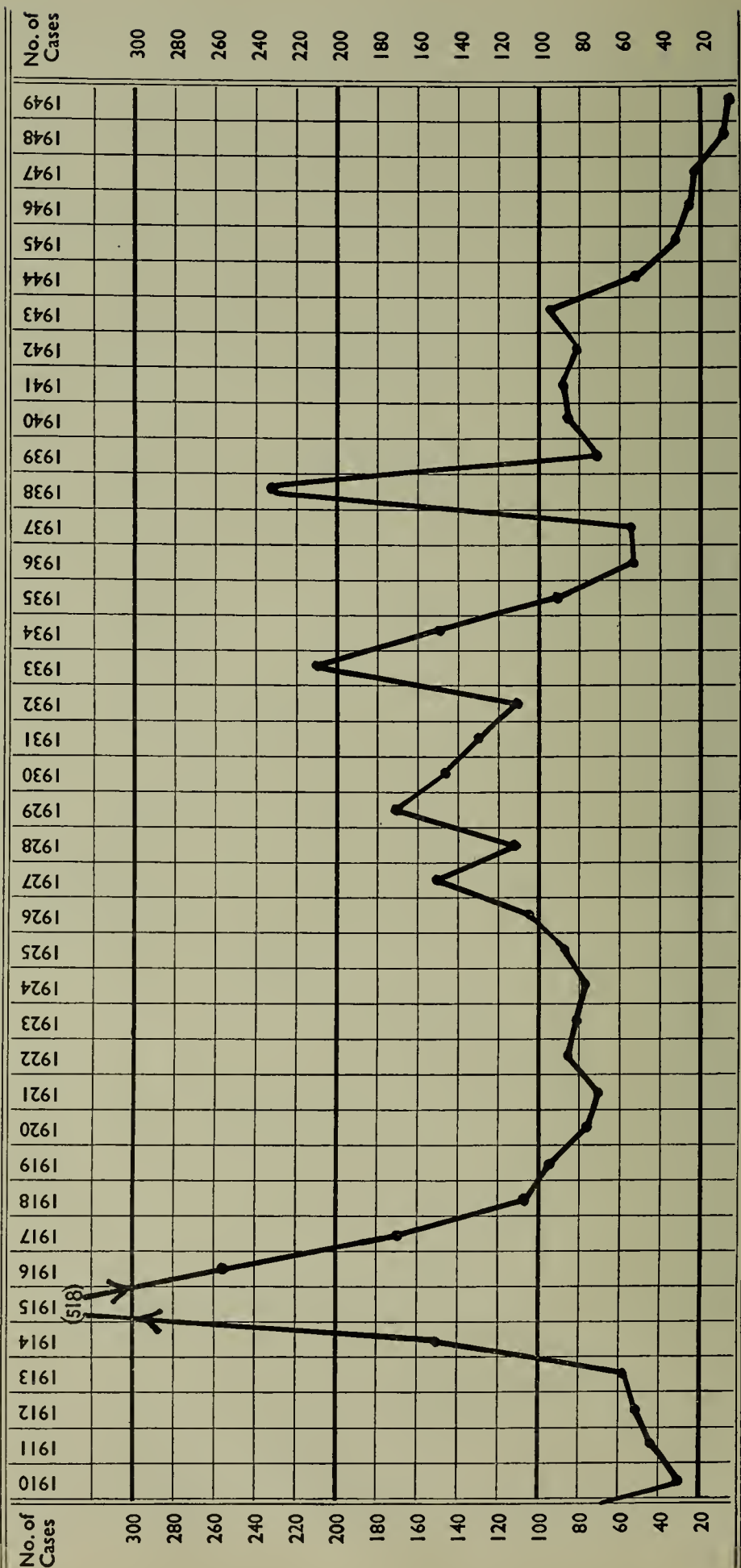
There was no evidence in the Country as a whole of any return to the epidemic condition of 1947 in respect of Poliomyelitis. Nevertheless, the anxiety concerning this disease persists. No fewer than ten cases were notified, but only three were confirmed. Two of the confirmed cases were not admitted to Hospital, but were notified in the closing stages of the disease, when one was already wearing a leg iron.

The follow-up of the children showed that one had made a complete recovery while the others were continuing treatment and requiring the use of a walking caliper or other form of support.

County Borough of Rochdale — Scarlet Fever Incidence — Years 1910-1949



County Borough of Rochdale — Diphtheria Incidence — 1910-1949



Scarlet Fever and Diphtheria.

The accompanying graphs show the incidence of Scarlet Fever and Diphtheria over the last 40 years. These graphs were commented on in 1947 Report and as stated last year it does not appear wise to analyse them at less than about five year intervals.

Marland Infectious Diseases Hospital.

There were 212 cases admitted to this Hospital from the Rochdale County Borough, which together with 21 in Hospital on the 31st December, 1948, makes 223 cases treated during the year, as compared with 215 the previous year.

Of 18 cases sent in from the County Borough of Rochdale with a provisional diagnosis of Diphtheria, only 3 were confirmed. None of these 3 cases showed severe infection, none had been previously immunised and there were no deaths. A summary of the cases admitted to Hospital from Rochdale is given below :—

DISEASE		In Hospital on 31st December 1948	Admitted during the Year	Discharged	Died	Remain- ing in Hospital at end of Year 1949	Ages of Patients Admitted		
							Under 5 Years	5—15 Years	Above 15 years
Scarlet Fever	... ..	16	125	133	...	8	57	63	5
Diphtheria	... ..	...	3	3	...	...	1	...	2
Enteric Fever	... ..	...	1	1	...	...	...	...	1
Meningitis—									
(1) Cerebro Spinal	... ..	...	3	2	1	...	2	...	1
(2) Tuberculous	... ..	...	2	1	1	...	...	2	...
(3) Pneumococcal	... ..	...	2	...	2	...	1	...	1
Measles	... ..	...	18	18	...	...	14	3	1
Erysipelas	... ..	2	6	8	...	...	...	...	6
Puerperal Pyrexia	... ..	...	...	...	...	...	...	...	...
Poliomyelitis	... ..	...	1	1	...	...	1	...	...
Other Diseases	... ..	3	51	47	4	3	24	10	17
Total	... ..	21	212	214	8	11	100	78	34

DIPHTHERIA IMMUNISATION.

The campaign of general propaganda referred to in previous reports has been continued throughout the year in support of the national campaign.

The parents or guardians of each child are sent a card explaining the dangers of Diphtheria and the facilities for Diphtheria Immunisation on the child attaining the age of one, and the Health Visitors are provided with special cards which they leave at the homes in the course of follow-up visits.

Immunisation continues to be available to the same extent as reported last year. These efforts throughout the year were effective in achieving immunisation in respect of 1,204 children under five and 820 children between the ages of five and fifteen. These figures compare with 1,049 under five and 495 between the ages of five and fifteen in 1948. In addition, 866 children received re-inforcing doses usually about four years after the initial treatment.

It is to be noted that the figures given above for 1948 immunisations are not the same as those which appeared in the Report last year. This is due to the fact that when the arrangements for immunisation against Diphtheria were finally settled between the General Practitioners and Ministry of Health, an enquiry was made as to the cases immunised by General Practitioners in their own practices, but not reported upon to the Local Authority. This resulted, in so far as Rochdale is concerned, in the addition of 83 children under five years of age and one child between the age of five and fifteen.

TUBERCULOSIS.

There were 142 new cases of Tuberculosis notified as against 85 the previous year and 100 in 1947, and an average of 93 during the five years 1942-46.

Of these 142 cases, 118 were Pulmonary and 24 Non-Pulmonary. The Non-Pulmonary cases showed a very definite increase as compared with 17 the previous year and 9 in 1947.

In addition, 11 cases, 10 Pulmonary and 1 Non-Pulmonary, came to the knowledge of the Department for the first time otherwise than by notification. Of these, 2 Pulmonary were reported after death and 8 Pulmonary and 1 Non-Pulmonary were transferred from other areas.

It should be noted that the Pulmonary notifications include 61 such cases notified as a result of the Mass Miniature Radiography Survey.

Comparative figures are given below :—

Average 5 year periods	NOTIFICATIONS		
	Pulmonary	Non- Pulmonary	Total
1913—17	184	108	292
1918—22	199	50	249
1923—27	85	40	125
1928—32	85	36	121
1933—37	81	26	107
1938—42	84	29	113
1943—47	71	20	91
1948	68	17	85
1949	118	24	142

The following table gives a summary of the known cases of Tuberculosis in the Borough as at the 31st December, 1949 :—

	Males	Females	Total
Pulmonary	272	225	497
Non-pulmonary ...	77	69	146
	349	294	643

The following table sets out the number of deaths and mortality rates for the years 1938 and onwards.

Year	Pulmonary Tuberculosis		Non-Pulmonary Tuberculosis		All Forms	
	Deaths	Rate per 1,000 pop.	Deaths	Rate per 1,000 pop.	Deaths	Rate per 1,000 pop.
1938	44	0.48	5	0.05	49	0.53
1939	41	0.46	6	0.06	47	0.52
1940	51	0.58	12	0.14	63	0.72
1941	53	0.61	11	0.13	64	0.74
1942	44	0.52	5	0.06	49	0.58
1943	36	0.44	10	0.12	46	0.56
1944	39	0.48	10	0.12	49	0.60
1945	32	0.39	6	0.07	38	0.46
1946	31	0.36	11	0.13	42	0.49
1947	41	0.47	9	0.10	50	0.58
1948	44	0.50	5	0.06	49	0.56
1949	15	0.17	4	0.04	19	0.21

The 142 new cases notified, together with the number of deaths resulting from the disease are arranged in the summary below :—

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	...	...	...	...	...	...	...	...
1—5 years	1	...	...	4	...	...	...	2
5—15 „	4	1	5	5	...	1	1	...
15—25 „	13	19	...	4	4	3	...	1
25—35 „	10	19	1	3				
35—45 „	16	9	1	...	4	1	...	...
45—55 „	12	4	...	...		
55—65 „	5	3	...	...		
65 years and over	1	1	...	1	1	1	...	..
TOTAL	62	56	7	17	9	6	1	3
1948	42	26	7	10	28	16	2	3

Attention must be drawn to the very low death rates from both Pulmonary and Non-Pulmonary Tuberculosis. Both these are only about half the previous lowest rates recorded. It is not thought wise to discuss these figures until they can be reviewed in relationship to the figures for 1950.

Residential Treatment.

There were 51 Rochdale patients in residence at various Sanatoria on the 31st December, 1948, and during the year 113 other patients (58 males, 55 females) were admitted as shown in summary below :—

Institutions	Remaining in Hospital at end of 1948	Admissions			Discharged during 1949	Died	Remaining in Hospital at end of 1949
		Total	Males	Females			
Wolstenholme Pulmonary							
Hospital	11	33	33	—	32	1	11
Springfield Sanatorium ...	20	39	—	39	37	1	21
Rochdale Children's							
Orthopaedic Hospital...	12	7	3	4	16	1	2
Shropshire Orth. Hospital	1	1	1	—	—	—	2
Other Sanatoria	7	33	21	12	23	1	16
TOTAL	51	113	58	55	108	4	52

Springfield Sanatorium.

At the end of 1949 there were in residence 21 patients from Rochdale. During the year there were 39 admissions, 1 death and 37 discharges in respect of Borough cases.

Special treatment carried out at the Sanatorium in respect of Borough cases included Artificial Pneumothorax with 11 Inductions and 556 Refills, more than half of which were administered to out-patients, and Pneumoperitoneum treatment with 28 Inductions and 689 Refills.

The X-ray work carried out at the Sanatorium included 1,082 films for Borough out-patients, as well as 760 screen examinations for out-patients. X-ray examination by film and screening was also carried out in respect of the nursing staff.

Public Health (Prevention of Tuberculosis) Regulations, 1925, and Public Health Act, 1925 (Section 62).

The former relates to persons engaged in the milk and dairy trade who are suffering from Tuberculosis, whilst the latter confers powers for the removal to hospital of infectious persons suffering from Pulmonary Tuberculosis. No occasion has arisen during the year where it has been found necessary to make use of the powers conferred by this Act and Regulation.

Tuberculosis Physician's Report (Dr. A. H. Heyworth, M.B., Ch.B., D.P.H.):

Prior to 1949, the situation with regard to Tuberculosis in Rochdale was well defined. The population was virtually stationary and native to the town. War-time evacuees had come and gone with no known effect on the incidence or spread of Tuberculosis in Rochdale. There had been no great influx of workers from rural districts into the town. It was anticipated that the measures already in operation would, in these times of peace, be effective in gradually reducing the incidence and mortality rates of Tuberculosis in Rochdale to a very small figure.

The town has a progressive health policy and every step is taken to promote positive health. Positive health reduces the susceptibility to infection and modifies the course of an established infection. Many people overcome quite considerable infections of Tuberculosis in the lungs without being aware of the nature of their ill-health and often without feeling very ill at all. An indication of such numbers in Rochdale is given in the brief report on the recent Mass Radiography Survey. Such a building-up of the native resistance to Tuberculosis is to be expected in an urban community in which the problems of Tuberculosis have been given their rightful consideration in the general health policy.

Since 1948, there has been an increase in the non-native population. Many of the newcomers to the town have not the same resistance to Tuberculosis as is possessed by the native population. Rural workers from Eire, European Voluntary Workers and Displaced Persons from rural communities in the Ukraine, in Poland and in the former Baltic States have never acquired much immunity. Some industrial workers from Europe have had their resistance undermined by long-continued toil and hardship. Until such time as these industrial workers become urbanised and acquire some resistance to disease, these newcomers to the town must receive special consideration from the Tuberculosis Department.

It was, therefore, all the more fortunate that the last six months of 1949 were chosen by the Ministry of Health for the first visit to this area of one of their Mass Radiography Units. In the Survey carried out by this Unit considerable numbers of these workers were examined.

There were two young Irish workers referred to the Dispensary with active Tuberculosis (1 male, 1 female), the young girl with a 'positive' sputum. Also referred were 14 European Voluntary Workers (8 male, 6 female). All will require close supervision from the Dispensary.

By the end of June, 1950, 233 European Voluntary Workers had received Dispensary examination. The numbers are increasing steadily. By this time 28 cases had become notified as Tuberculous, including one non-respiratory case. There were 18 cases who were receiving or had received Sanatorium or Hospital treatment in Rochdale. Of the contact examinations carried out in this group, one adult sister contact was found with a 'positive' sputum.

It is obvious that the incidence and severity of Tuberculosis in this group is considerably higher than in our native population and special consideration is essential. Fortunately, members of this group are not hesitant in seeking X-ray examination and full attendances at our Clinic sessions are likely to be the rule for many years.

Mass Miniature Radiography Survey.

Manchester Regional Hospital Board's Mass Miniature Radiography Unit No. 4, visited Rochdale from June to December. During this period 21,081 cases (11,557 males, 9,524 females) resident in the Borough were examined.

Of this number 200 were referred to the Dispensary (131 males, 69 females), including 17 European Voluntary Workers (11 males, 6 females). All except 21 of these cases have in fact attended the Dispensary. It was found that 11 of those who attended were already on the Register of Tuberculous Persons and, therefore, were under general supervision.

These 200 cases may be classified as follows :—

49 suffering from active Pulmonary Tuberculosis ;

1 suffering from active Non-Pulmonary Tuberculosis ;

100 showing evidence of inactive Tuberculosis ;

50 suffering from various chest diseases other than Tuberculosis.

There were only 11 cases who were shown to have a 'positive' sputum, i.e. to be in an infectious condition. Four of the cases showed extensive disease and one of these four has already died.

Sanatorium treatment was arranged promptly for all active and infectious cases and none of these had to wait for a Sanatorium bed.

Of the 50 cases suffering from other chest conditions, the highest group (21) was Bronchitis of varying degrees, followed by Pneumoconiosis with 14 cases.

A Senior Medical Officer of the Pneumoconiosis Medical Panel in Manchester, at my request, visited the Dispensary to consult with me on the above cases of Pneumoconiosis.

The Survey also resulted in the discovery of five cases of Cancer of the Lung. Of these, three cases have already proved fatal. In the remaining two cases the growth was found too extensive for removal. It would thus appear that Miniature Mass Radiography does not play an important part in the early detection of Cancer of the Lung.

Chest Clinic Work.

During the year 974 new patients attended the Clinic. Of these 137 were referred by the Mass Miniature Radiography Centre and are included in the previous report. Deducting these cases, 645 new cases were referred to the Clinic by private Medical Practitioners, Medical Officers of Hospitals and the School Medical Department. In addition, 192 cases were referred to the Clinic by the Tuberculosis Health Visitors for examination as contacts with a case of Tuberculosis in the household.

Comparative figures show a substantial increase in numbers over the previous years :—

Year		New Cases	New Contacts	M.M.R.	Total
1945	...	348	79	—	427
1946	...	357	98	—	456
1947	...	338	168	—	506
1948	...	450	142	—	592
1949	...	645	192	137	974

Several factors are obviously at work here. In the first place the Clinic no longer operates as a Tuberculosis Dispensary, but has widened its scope to include all forms of Chest Disease. Secondly, the public is becoming more and more aware of the value of the services given by the Clinic. This knowledge reaches them through information given by the patients who have already used the service, as well as by the various forms of health propaganda, personal and local, as well as national and written.

VENEREAL DISEASES.

Although this Department is no longer responsible for the treatment of Venereal Disease no material changes had been made in the day to day arrangements at the end of the year.

There were 681 cases (407 males and 274 females) dealt with during the year, as against 711 in 1948. The number of new cases was 331 which is equal to the average for the years prior to the war.

The following summary gives the number of cases dealt with during the past three years :—

	Year	1949	1948	1947
		<hr/>	<hr/>	<hr/>
1. No. of persons under treatment or observation at commencement of year		331	343	330
2. No. of persons who ceased to attend in previous years and who returned to the Centre suffering from the same infection		2	8	6
3. No. of new cases who have had previous treatment		17	18	11
4. No. of new cases		331	342	313
	Total cases dealt with ...	<hr/>	<hr/>	<hr/>
		681	711	660
5. Total attendances-For attention of Medical Officer		5,797	7,047	5,927
	For irrigation, dressing etc ...	3,118	4,386	4,137
6. No. who ceased to attend—				
(a) Before completion of treatment		13	16	24
(b) After completion of treatment, but before final tests as to cure		9	12	11
7. No. discharged after completion of treatment and final test of cure or after diagnosis as non-venereal		272	330	278

Sanitary Circumstances of the Area

I am indebted to the Chief Officials of the various Departments of the Corporation for information included in this section of the Report.

Water Supply.

- (i) The water supply of each of the several parts of the area has been satisfactory (a) in quality, (b) in quantity.
- (ii) Bacteriological examinations of the raw water and of the treated water have been made, 85 samples having been examined during the year with satisfactory results. The results of chemical analysis of samples of the treated water were satisfactory.
- (iii) Whilst the raw water from each of the reservoirs would be liable to have plumbo-solvent action, no dissolved lead had been found during the year in any of them. The pH value of the water as it goes into supply is raised by the addition of lime water and is, no doubt, the explanation why on no occasion has lead been found in solution. For the past few years all the waters have been chlorinated. During the year 70 samples have been submitted for chemical analysis and have been found satisfactory.
- (iv) No special form of contamination has had to be dealt with during the past year. Practically all inhabited buildings have been removed from the gathering grounds and negotiations are in progress for the acquisition of some of the few occupied premises still existing. Should it be considered necessary, steps will be taken to acquire the remainder.
- (v) No dwellinghouses, nor any part of the population, are normally supplied by means of standpipes. The number of privately-owned sources of water supply is not large.

R. N. SIMPSON, A.Inst.W.E.
Waterworks Engineer

Drainage and Sewerage.

At Roch Mills Sewage Purification Works the sewage is screened after grit removal and then passed through Primary and Secondary Sedimentation Tanks. Half the flow is then passed through an Activated Sludge Plant constructed on the Kessener System and the other half is pumped to bacteria beds. Good effluents are obtained and there is a little reserve of capacity.

Construction of the new Norden sewer was begun. When this is completed all the sewage from the Norden area will be conveyed to Roch Mills and two small Works abandoned. It will also enable the Corporation to accept for treatment certain highly polluting trade wastes at present passing into Naden Brook.

Rivers and Streams.

The Lancashire Rivers Board are responsible for the prevention of pollution of rivers and streams in this area, and any cases which come to the notice of the Borough Surveyor are reported to the Board for their attention.

There have been a number of applications from manufacturers to discharge into the Corporation sewers trade wastes at present passing after partial treatment into local watercourses. Several new agreements have been completed and in other instances investigations are being made to determine conditions and charges.

W. H. G. MERCER, B.Sc., A.M.Inst.C.E.
Borough Surveyor.

Meteorological Notes.

The following is a summary of the features of the year as recorded at the Meteorological Station, Roch Mills Sewage Works, and is included by courtesy of the Borough Surveyor.

The year was chiefly memorable for the dry sunny weather of the Summer months. Over a period of 46 days commencing on the 28th May, only 0.77 inches of rain were measured and from the 11th June to the 12th July, no rainfall was recorded. But for the foresight of the Corporation in constructing Watergrove Reservoir in 1938, this drought, following two years with an annual total rainfall below the average, would, no doubt, have caused restrictions of water consumption in Rochdale.

In spite of this the total rainfall for 1949 was 41.79 inches being only 0.07 inches less than in 1948.

The sunshine recorded during the year was considerably higher than 1948, particularly during the months of June, August and September. Nevertheless there were 85 days during the year in which no sunshine was recorded and 126 days in which sunshine did not exceed one hour.

On the whole the year was free from troublesome fogs.

Public Cleansing.

There was no important extension or improvement during the year in the arrangements for public cleansing. Indeed, a continuing uncertain supply of suitable labour for this important but frequently unattractive work and a heavy yield or residuum from poor domestic fuel made it impossible always to maintain the authorised standards of service as to frequency and/or quality.

The provision and maintenance of dustbins for house refuse as a charge against the general rate, begun in 1948, continued to work satisfactorily. Under this scheme 3,147 British Standard dustbins were issued in 1949.

House refuse was collected by covered motor vehicles and passed through a separation and incineration plant at Entwisle Road Depot. The process included the screening out of fine ash and fuel cinder, the magnetic extraction and baling of tin cans and other ferrous metals, the hand salvaging of other saleable things and the production of enough steam for the central public baths, the steam disinfecter and the pig food plant. Here 1,502 tons of kitchen waste from Rochdale and nine other districts was sterilised by heat treatment (1,361 tons in 1948). A new drying machine was installed to replace one which went out of service in 1947.

There was a fall in the demand for waste paper, followed by the removal of salvage obligations from Local Authorities (except with regard to kitchen waste). In consequence, the Corporation discontinued its special free collection of waste paper and reverted to the former practice of charging for the collection and disposal of trade refuse, but at increased rates. The total tonnage of scrap metals sold was 791 (743 in 1948), waste paper 380 (592), and textiles, bones, bottles, jars, fuel cinder and sundries 466 (472).

To replace the two obsolete steam-operated gully emptiers and to restore the emptying of street gullies to a sufficient frequency, two modern petrol-driven machines were ordered ; they will be in service by the time this Report appears.

H. COOK, F.Inst.P.C.,
Cleansing Superintendent.

SANITARY INSPECTION OF THE AREA.

During the year 677 Preliminary or Informal Notices and 19 Abatement or Statutory Notices for the abatement of nuisances and the remedy of sanitary defects in and around dwellings were served on owners and occupiers, and resulted in the accomplishment of works given in the classified statement below. The statement also includes works carried out at factories and food storage premises, etc., following the service of Preliminary Notices, but excludes work done under the Housing Acts.

NATURE OF NUISANCES DEALT WITH	Nos.
HOUSES—	
Verminous dwellings disinfested	2
Dirty Houses limewashed and cleansed	20
Repairs to roofs, floors, walls, eavestroughing, rainwater pipes, chimneys, and general repairs to brickwork or stonework (including dampness) and repair or renewal of house fittings...	1338
YARDS, PASSAGES, ETC.—	
Repairs to yard surfaces, gates, walls, etc.	18
Offensive accumulations and stagnant water removed	9
SANITARY CONVENIENCES—	
Closet buildings repaired	90
Closet fittings repaired	120
DRAINS—	
Main or branch drains repaired or cleared	62
GENERAL—	
Want of limewashing or cleansing of premises used for the preparation or storage of food	29
Absence or unsatisfactory condition of sanitary accommodation at factories	7
Miscellaneous nuisances remedied	23

Probably one of the most exacting duties falling upon this Department during recent years has been the investigation of applications for re-housing with a view to the presentation of the most urgent cases to the Housing Committee.

During 1949, 208 houses have been inspected and reported upon in this connection. After inspection and report each case is considered individually by the Medical Officer of Health and the Chief Sanitary Inspector in accordance with certain broad principles before being referred to the Housing Committee for final decision.

Housing.

In the latter part of 1948 the Housing Committee agreed to accept suggestions for the demolition or closing of unfit houses. This was on a very limited scale and during 1949 operations had to be restricted still further. Under these circumstances it was only possible to deal with houses which were both unfit for habitation and so dilapidated as to be dangerous. Representations concerning 53 such houses were submitted during the year. Of these 50 resulted in the making of Demolition Orders and 2 in the making of Closing Orders.

During the early part of the year authority was obtained to make a survey of the housing conditions in the Borough. A system of records was devised and the equipment for filing the records was purchased. In June, one temporary Survey Officer was engaged and in September another one was appointed. It was the intention, as soon as these two had been trained, to engage further staff, but the demands of economy have made it impossible to fulfil this intention. With a limited staff it will be impossible to complete the whole of the survey quickly—the only way in which a properly balanced picture of the housing conditions in the Borough can be secured. Arrangements have, therefore, been made to concentrate on areas of the town known to contain much bad housing, or where the housing is obsolescent, and it is hoped that by doing this we shall obtain sufficient information on which to base a properly co-ordinated programme for the future planning of Clearance Areas, Improvement Areas and the demolition of individual unfit houses.

At the end of the year the Survey Officers had completed inspections at 1,974 houses.

COMMON LODGING HOUSES.

There are seven of these premises now registered. The accommodation provided comprises 35 rooms containing 445 beds. Regular visits of inspection have been made during the year.

SMOKE ABATEMENT.

There were 161 smoke observations of one half-hour each made during the year and 23 contraventions of the Act were reported to the Committee.

The Committee authorised the service of the appropriate Notice on 18 firms and in one case a prosecution was instituted. Unfortunately, this failed on a technicality and the case was dismissed.

In almost every case the quality of the fuel was blamed for the occurrence. This was found to be a contributory factor, but on some occasions faulty plant and careless firing were equally the cause of the trouble.

The Ministry of Fuel and Power have been kept informed of all unsatisfactory observations and their Engineers have co-operated with firms in the town in attempting to overcome difficulties.

INSPECTION AND SUPERVISION OF FOOD.

Dairies and Cowsheds.

The Milk and Dairies Regulations, 1949, which came into operation on the 1st October, transferred the control of milk production from Local Authorities to the Ministry of Agriculture and Fisheries. At the date of transfer there were 84 farms on the register and 106 visits of inspection had been made. In the report for the year 1948 it was noted that there was a tendency for the producer retailer to give up his own round and to become a wholesale purveyor of milk. This trend continued during 1949.

Milk Distribution.

The Regulations mentioned above allow the Local Authority to retain control of milk distribution and new Regulations to control the use of special designations have been made which leave the Local Authority in control of the distribution of that kind of milk. The use of the designation "sterilised" now requires a licence and all shops retailing "sterilised" milk are now licensed as milk distributors and are also licensed as "Dealers in Sterilised Milk". The licences are renewable annually.

The numbers and kinds of licences and registrations issued under these new Regulations are given below :—

Premises registered as Dairies	...	...	...	...	...	3
Persons licensed as Distributors of Milk	...	...	...	...	...	234
Dealer's licences to sell Pasteurised Milk	...	...	...	...	...	24
Dealer's licences to sell Tuberculin Tested Milk	...	...	...	...	...	22
Dealer's licences to sell Sterilised Milk	...	...	...	...	...	222
*Supplementary Licences—Pasteurised Milk	...	...	...	...	...	16
					...	16
					...	16
					...	1

*A Supplementary Licence is issued to persons whose premises are outside the Borough, but who distribute milk within the Borough.

There has been a considerable increase in the sale of Pasteurised Milk and Tuberculin Tested Milk. This demand must always have been present and during the latter part of 1948 and the earlier part of 1949 it became possible to satisfy it. It is a matter for congratulation that these grades of milk are now more readily available.

Cleanliness of the Milk Supply.

There were 166 samples submitted to the Methylene Blue Reduction Test. This is the test prescribed for Accredited Milk, but it was also used by the Department as a test for ungraded milks. Of the samples submitted 102 satisfied the test and 64 were unsatisfactory. Where the milk was produced on farms outside the borough the unsatisfactory samples were reported to the Local Authority concerned. If the source was a Borough farmer the farm was visited and advice was given.

On one occasion it was necessary to take samples at various stages of the production to determine the source of contamination. The investigation was successful and the cause of the trouble removed.

Under the new Milk Regulations all unsatisfactory samples are now reported to the Ministry of Agriculture and Fisheries whose duty it is to attend to the matter.

To determine the efficiency of sterilisation 6 samples were submitted to the Turbidity Test. All satisfied the test.

To determine whether Pasteurisation had been adequately carried out 34 samples were submitted to the Phosphatase Test. This resulted in 33 being recorded as satisfactory and one as unsatisfactory. In the case of the unsatisfactory sample representations to the firm concerned produced immediate improvement. No further trouble was experienced from this source.

Examination of Milk for Tubercle Bacilli.

There were 76 samples of milk taken during delivery to customers for examination for the presence of tubercle bacilli. Negative results were received for 72 samples but four samples, taken from three farmers, were reported to contain tubercle bacilli. These positive samples were reported immediately to the Ministry of Agriculture and Fisheries, whose investigations at the farms concerned resulted in the isolation of three cows giving tubercular milk, all of which were slaughtered.

A further method of discovering tubercular milk supplies is by reporting the presence of congenital tuberculosis in young calves slaughtered for food. A note of this is included under the heading "Carcases Inspected and Condemned".

Inspection of Premises used for the Preparation and Sale of Foodstuffs.

During the year 1,960 visits have been made to this type of premises, chiefly slaughterhouses, butchers' shops and cooked food shops. During the year an inspection of all canteens at factories and workshops was carried out, and the cafes and restaurants in the town were also visited.

Rochdale Corporation Act, 1937.

This Act deals with the registration of premises for the preparation and sale of various foodstuffs. There were 88 premises registered for the sale and storage of food. Every effort was made to ensure that pre-packed ice cream only was sold so that the possibility of contamination could be minimised. Where the ice cream was manufactured outside the Borough the conditions of manufacture were the subject of enquiry to the Local Authority concerned.

One hawker and his premises were also licenced under this Act during the year.

Meat and Food Supply.

There has been regular inspection of meat and food offered for sale and over 72 tons have been condemned as unfit for human consumption being either destroyed or disposed of for salvage purposes. The following table gives a detailed report on the examination of carcasses inspected at the slaughterhouses :—

Carcasses Inspected and Condemned

	Cattle ex- cluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	2,424	2,726	1,221	16,572	254
Number inspected	2,424	2,726	1,221	16,572	254
ALL DISEASES EXCEPT TUBERCULOSIS :					
Whole carcasses condemned ...	2	20	15	28	1
Carcasses of which some part or organ was condemned ...	1,145	772	—	561	3
Percentage of the number inspected affected with disease other than Tuberculosis ...	47.7%	29.06%	1.23%	3.55%	1.57%
TUBERCULOSIS ONLY :					
Whole carcasses condemned ...	5	80	10	—	3
Carcasses of which some part or organ was condemned ...	220	1,456	—	—	23
Percentage of the number inspected affected with Tuberculosis	9.28%	56.3%	0.82%	—	10.24%

It will be noted that ten calves were condemned because of Tubercular lesions mainly in the liver. As these were very young calves it was considered probable that the infection had been derived from the mother and accordingly the Ministry of Agriculture and Fisheries (Animal Health Division) were notified. Their investigations on the farms resulted in the discovery of four tubercular cows which were destroyed, thus removing from dairy herds animals which were either giving tubercular milk or were potential sources of it.

In addition to the inspection of animal carcasses given in the foregoing table, the Meat Inspectors saw the carcasses of 3,328 horses. Of these 5 whole carcasses 53 part carcasses, and 486 organs were condemned as unfit for human consumption.

FOOD AND DRUGS ACT, 1938.

During the year 251 samples of food were submitted for analysis. Of these 152 were samples of milk, 34 were samples of sausage and 29 were samples of ice cream or ice cream ingredients. The remaining 36 samples covered 17 different kinds of food.

There were 31 samples reported as adulterated. Details of these are as follows :—

Milk.

16 samples of milk were reported to be adulterated or to be sub-standard. Of these—

- 3 were informal samples which were followed up by the taking of formal samples. These formal samples were reported to be adulterated and the vendors were prosecuted.
- 2 samples were proved to be sub-standard by the application of the Hortvet Freezing Point Depression Test.
- 1 sample appeared adulterated. The “appeal to cow” sample, however, was below standard and a further sample taken during delivery was also below standard. The matter was, therefore, referred to the Ministry of Agriculture and Fisheries for advice on feeding and on herd management.
- 3 cases constituted “first offences” and warning letters were sent by order of the Health Committee.
- 5 samples resulted in prosecutions. Fines amounting to £73 were imposed by the Magistrates and the vendors were ordered to pay £5 5s. 0d. costs.

Sausages.

- 15 samples of sausage were reported to be deficient in meat content. Of these 12 were “informal” samples. “Formal” samples were taken from the vendors concerned and genuine results were obtained. Of the remaining 3 cases, one vendor was prosecuted, fined £3 and ordered to pay £3 13s. 6d. costs; the other two cases showed only minor deficiencies and on the advice of the Public Analyst further samples were taken which proved to be genuine.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The staff engaged in this work consists of two men who are given temporary assistance when sewer treatment is undertaken.

During the year 283 dwellinghouses and 237 business premises were visited or treated. This required 1,478 visits and the estimated kill was at least 1,200 rats.

The sewers were treated twice during the year. The treatment completed in January called for the baiting of 1,200 manholes; 280 were found to be infested and poison baits were placed in them. The second treatment during the year took place between August and November, 2,346 manholes were baited, 891 being infested were treated with poison baits.

Shops Acts, 1912 and 1934.

No notices under these Acts were issued during 1949.

Offensive Trades.

The number of premises at which these trades were carried on in the Borough is as follows :—

Tripe Boiling	...	...	...	...	...	1
Fellmongering	...	...	...	...	...	2
Knacker's Yard (Bone boiling)	...	...	...	...	...	1
Rag and Bone Dealers	...	...	...	...	...	5

The Knacker's Yard is visited regularly and periodical visits are made at the other premises.

Closet Accommodation.

The accommodation in the Borough at the end of December was approximately as follows :—

		1949	1948
Fresh Water Carriage System	...	27,876	27,361
Pail Closets	... ..	1,422	1,461
Waste Water Closets	... ..	1,506	1,552
Privy Middens	... ..	19	33

The Tables showing the progress of the work of closet conversion have been omitted.

FACTORIES ACT, 1937.

Certain provisions of the Factories Acts are the responsibility of the Local Authority and the administration of these provisions required 437 visits during the year. This figure includes 399 visits paid to bakehouses which are also classed as factories. Written Notices were sent in 35 instances concerning such matters as want of cleanliness and insufficient, unsuitable or defective closet accommodation.

Many works of improvement in sanitary accommodation were executed during the year and it is gratifying to notice that these in most cases went far beyond the provision of the minimum accommodation required by the Sanitary Accommodation Regulations.

CLEANSING STATION.

The general working of the Cleansing Station established at central premises in 1946 is under the supervision of a District Sanitary Inspector. The Station is open from Monday morning till Saturday mid-day. Evening sessions are available as required for those engaged in industry.

The following tables show the number of persons cleansed at this Station :—

	1949	1948	1947	1946
Scabies	161	241	465	937
Other Verminous Conditions ...	705	763	396	446
Total	866	1,004	861	1,383
	Scabies	Verminous Conditions	Total	
Infants	23	29	52	
Children of School Age ...	78	660	738	
Adults	60	16	76	
	161	705	866	

The increase in the number of cases of verminous conditions treated indicates that the Station, due to reduction in Scabies, is now able to treat many more children with verminous heads who had previously to be treated at home.

The arrangements continued whereby all reports on verminous conditions, including Scabies, are collected in one register in the Public Health Department. These reports may come from the Education Department, Health Visitors, Sanitary Inspectors, owners or occupiers of premises and any other persons or organisations. All premises reported in this category are visited by the Sanitary Inspectors and advice given according to the degree of infestation and the general condition of the premises. Steps are taken to ensure that all persons infested with scabies in the family attend at the Cleansing Centre.

**TABLE I.—Vital Statistics of Whole District during 1949,
and previous years.**

Year	Population estimated to Middle of each Year	LIVE BIRTHS		Nett Deaths belonging to the District.			
		Nett		Under 1 year of age		At All Ages	
		Number	Rate per 1,000 of est. population	Number	Rate per 1,000 Nett Live Births	Number	Rate per 1,000 of est. population
1939	*90,300	997	11.0	55	55	1322	14.7
1940	†86,670	1072	12.4	96	89	1575	18.2
1941	†85,780	1136	13.2	76	67	1371	16.0
1942	†83,150	1276	15.3	90	71	1282	15.4
1943	†81,550	1268	15.5	58	46	1324	16.2
1944	†81,380	1320	16.2	67	50	1174	14.4
1945	†81,100	1267	15.6	56	44	1263	15.5
1946	†85,200	1521	17.8	75	49	1272	14.9
1947	†86,110	1725	20.0	95	55	1399	16.2
1948	88,110	1500	17.0	57	38	1245	14.1
Average for years 1939-1948	84,935	1308	15.4	72	56	1323	15.6
1949	88,930	1362	15.3	56	41	1320	14.8

* Estimated Population for Birth-rate. The corresponding figure for Death-rate is 89,830.

† „ Civilian Population

TABLE II.
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE.
Year 1949.

		All Ages	0-	1-	5-	15-	45-	65-
ALL CAUSES	Males ...	622	36	10	5	32	181	358
	Females	698	20	3	3	29	150	493
1—Typhoid and Paratyphoid Fevers		1	...	...	...	1	...	...
2—Cerebro-spinal Fever	...	...	...	...	...	...	...	...
3—Scarlet Fever	...	...	...	...	...	...	...	...
4—Whooping Cough	...	...	...	...	...	...	...	...
5—Diphtheria	...	...	...	...	...	...	...	...
6—Tuberculosis of Respiratory System	...	15	...	...	1	7	5	2
7—Other Forms of Tuberculosis	...	4	...	2	1	1	...	...
8—Syphilitic Disease	...	5	...	...	...	...	3	2
9—Influenza	...	13	...	...	...	...	...	13
10—Measles	...	4	...	4	...	...	...	...
11—Acute Poliomyelitis and Polioencephalitis	...	1	...	...	...	1	...	...
12—Acute Infectious Encephalitis	...	2	...	...	...	...	1	1
13—Cancer of Buccal Cavity and Œsophagus	...	3	...	...	...	...	...	3
Cancer of Uterus	...	15	...	...	...	1	8	6
14—Cancer of Stomach and Duodenum	...	33	...	...	...	...	7	26
15—Cancer of Breast	...	18	...	...	...	2	6	10
16—Cancer of all other sites	...	134	...	...	1	6	50	77
17—Diabetes	...	10	...	...	...	...	5	5
18—Intra-cranial Vascular Lesions	...	188	...	...	...	1	39	148
19—Heart Disease	...	341	...	...	...	9	75	257
20—Other Diseases of the Circulatory System	...	120	...	...	...	...	26	94
21—Bronchitis	...	121	...	...	...	3	38	80
22—Pneumonia	...	36	12	3	...	3	6	12
23—Other Respiratory Diseases	...	22	...	1	...	1	14	6
24—Ulceration of the Stomach or Duodenum	...	6	...	...	...	...	4	2
25—Diarrhœa (under 2 years of age)	...	3	2	1	...	...	...	...
26—Appendicitis	...	3	...	...	...	1	...	2
27—Other Digestive Diseases	...	24	...	...	...	1	11	12
28—Nephritis	...	25	...	...	...	...	11	14
29—Puerperal and Post-Abortive Sepsis...	...	...	...	...	...	...	...	...
30—Other Maternal Causes	...	3	...	...	...	3	...	...
31—Premature Birth	...	20	20	...	...	...	...	...
32—Congenital Malformations, Birth Injury, Infantile Disease	...	18	17	...	...	1	...	...
33—Suicide	...	16	...	...	...	4	5	7
34—Road Traffic Accidents	...	6	...	...	1	...	1	4
35—Other Violent Causes	...	16	3	...	2	5	2	4
36—All Other Causes	...	94	2	2	2	10	14	64

TABLE III.

INFANT MORTALITY.—Net Deaths from stated causes at various
Ages under one year of age—Year 1949.

CLASSIFIED CAUSES OF DEATH				AGE AT DEATH					Total Deaths under 1 year	
				Under 4 weeks	4 weeks to 3 months	3-6 months	6-9 months	9-12 months	1949	1948
Whooping Cough	...	...	...	...	...	...	...	...	...	...
Diphtheria	...	...	...	...	...	...	...	...	...	...
Tubercular Diseases	...	...	...	...	...	...	...	...	...	1
Syphilitic Disease	...	...	...	...	...	...	...	...	...	...
Influenza	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	2
Pneumonia	...	...	...	5	1	3	3	12	11	
Other Respiratory Diseases	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis	...	1	...	...	...	1	2	4		
Other Digestive Diseases	...	...	...	...	...	...	...	...	...	...
Premature Birth	...	...	20	...	...	...	...	20	18	
Congenital Debility, Malformations, etc.	...	13	3	1	...	...	17	17		
Violence	...	...	2	1	...	...	3	3		
Other Causes	...	...	1	...	...	1	2	1		
ALL CAUSES	...	...	37	9	2	3	5	56	57	

Net Live Births in the year :—Legitimate 1,271 ; Illegitimate 91.

Net Deaths in the year :—Legitimate infants 47 ; Illegitimate infants 9.

ANNUAL REPORT

ON THE
MEDICAL INSPECTION OF SCHOOL CHILDREN
For the Year ended 31st December, 1949

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SCHOOL MEDICAL SERVICE.

Chairman of Education Committee	Alderman C. CROWDER.
Director of Education	...	...	...	...	A. ROYDS, B.Sc., M.Ed.
Schools Medical Officer	...	...	...	...	JOHN INNES, M.D., D.P.H.
Deputy School Medical Officer	...	...	...	...	NORA MILLS, M.D.
Assistant School Medical Officer	...	...	...	...	MARGARET L. DENNIS, M.R.C.S., L.R.C.P.
Senior School Dental Officer	...	...	...	...	H. P. GLESDALE, L.D.S.
Assistant School Dental Officers	...	...	...	...	R. J. G. YOUNG, L.D.S. One Vacancy
Speech Therapist	...	...	...	...	Vacant
School Nurses	...	...	...	...	M. CROWTHER, R.F.N., S.R.N., C.M.B., H.V. E. BLEASDALE, S.R.N., S.C.M. O. FAIRHURST, S.R.N., C.M.B. M. M. TURNER, S.R.N., C.M.B., H.V. B. MADEN, S.R.N. M. WILD, S.R.N., S.C.M.
Dental Attendants	...	...	...	...	G. PETRIE. V. M. BROWN. J. M. COCKCROFT.
Clerk	...	...	...	...	J. MILLS.

Consultants :

Ophthalmic Surgeons	...	...	...	...	R. S. SCOTT, M.B., B.Ch., D.O.M.S. P. HARRY, M.D., D.P.H.
Ear, Nose and Throat Consultant	...	...	...	...	V. SMITH, M.D., F.R.F.P.S.
Orthopædic Consultant	...	...	...	...	A. P. GRACIE, F.R.C.S.

COUNTY BOROUGH OF ROCHDALE.

To the Chairman and Members of the Education Committee.

LADIES AND GENTLEMEN,

I beg to submit my Annual Report for 1949, being the forty-second report on the work of the School Medical Services in Rochdale.

The **School Population** once again shows a slight increase as compared with the previous year and the full effects of the raised school leaving age are now being felt. It has still been considered necessary to continue the medical examination of the seven plus group of children in whom the discovery of defects is of considerable importance.

There have been considerable changes, first of all in the distribution of the school population, secondly in the School Medical staff and lastly in the staffing of the Specialist Departments to which children are referred.

The opening of new school premises on the one hand and better medical staffing on the other, have caused more attention to be paid to the state of school premises.

The **General Physical Condition** of children continues to be satisfactory, while more and more time is having to be devoted to special and detailed examination of individual children.

At the majority of schools the position with regard to cleanliness of the children is satisfactory, but there are still a few schools at which very little progress in this direction seems to be made.

There has been no return to the former large numbers at the Minor Ailments Clinic for dressings and similar treatment. A very large number of these cases now find their way to the Casualty Department of the local hospital.

The **National Health Service Act** is still bearing very heavily upon the school child in three major directions. Although there has been some slight improvement, the Eye Service is still a long way behind the efficiency reached in 1947/1948. It is still impossible to carry out adequate follow-up work owing to the delay in the supply of glasses. In the Ear, Nose and Throat section delay in operative treatment for enlarged Tonsils and Adenoids is increasing. The figures locally may not be impressive as compared with those in larger areas, but once again they compare very unfavourably with the position prior to 1948, and there is a further cause for dissatisfaction in that the position can not be remedied either by the local Education Committee or by the local Hospital Management Committee.

In the Dental Health section we are still one Dentist short of establishment. It is true that we are more fortunate than some of our neighbours. What was

cause for anxiety in 1948 is now cause for regret in that one year of school leavers have left without some of the treatment which they ought to have had. Unfortunately, the Orthodontic Department of the Manchester Dental Hospital has been closed to us and there is no possibility of our own Dentists carrying out this work for the local children. These children also will later join the ranks of those for whom full provision is made in the National Health Service Dental Scheme, thus taking up more time for treatment which ought to be devoted to prevention.

At the end of the year arrangements had been made for the work done by Dr. Bateman at the Cripple Children's Clinic to be divided between the Consultant Orthopaedic Surgeon and the Consultant Physician.

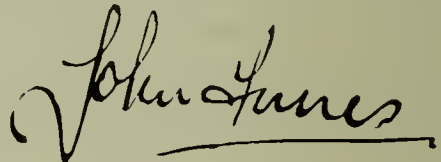
Early in the year part of High Birch was opened for the reception during the day of educationally sub-normal children. The results obtained so far have been most gratifying and encouraging.

During the year further extensions were made in the arrangements for the provision of school meals. The present position is that meals can now be provided for approximately 65% of the school population against the suggested capacity of 75%.

I have to acknowledge once again the services of all sections of the Department. In particular, I have to thank Dr. Mills for the preparation of this report and the Director's staff for other assistance.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,



Medical Officer of Health
and School Medical Officer.

15th August, 1950.

School Medical Service

The Registrar General's estimated civilian population for the County Borough for the year 1949 is 88,930.

Several schools are being regraded and renamed and the numbers at the end of the year were as follows :—

	No. of Schools		No. of Children	
County Schools	...	15	...	6,434
Voluntary Schools	...	13	...	2,797
Grammar Schools	...	2	...	929
Technical Schools	...	3	...	604
Special Schools	3	...	197
Nursery Schools	...	4	...	317
		—		—
		40		11,278
		==		==

There was an error in the figures published in the Annual Report for 1948, which should have given the number of children as 10,626.

Staff.

The staff of the School Medical Service is set out on Page 54. There have been several changes during the year. One Assistant Medical Officer, Dr. Eric Whitaker, left on the 30th April. Dr. Margaret L. Dennis began part-time duty on the 9th May, and was appointed as a full-time officer from the 1st September.

As Dr. Nora Mills, Senior Assistant Medical Officer, had been appointed Deputy Medical Officer of Health and it was reckoned that this would absorb four sessions per week, the Committee decided to appoint another Medical Officer, shared with the Health Committee, to bring the staff up to establishment. At the end of the year the Committee were making arrangements to interview applicants and Dr. Mary Lawson was actually appointed on the 11th January, 1950, to divide her time between School work and Infant Welfare work.

Dr. Bateman resigned from his position as Honorary Orthopaedic Surgeon to the Rochdale Cripple Children's Clinic at the end of June and after an interval during which the work was carried on temporarily by Mr. Winston, the Regional Hospital Board appointed Mr. A. P. Gracie as their Orthopaedic Surgeon for this district from August, 1949. The medical work was similarly taken over by Dr. Maher from the beginning of September.

In January, 1949, Dr. Marsland was appointed by the Education Committee to hold an Ear, Nose and Throat Clinic each week in addition to that already conducted by Dr. V. Smith.

The posts of Speech Therapist and third Dental Officer have both, unfortunately, remained vacant throughout the year.

School Hygiene.

It has recently become possible to devote more time to the inspection of school buildings and this inspection has shown a state of affairs which is in general inadequate and in particular instances deplorable. The four Nursery Schools, the two Schools for older children at Greenbank and Brimrod, the Girls' High School and the new County Infant School at Kirkholt are well provided with modern and adequate sanitary conveniences and washing facilities. Many of the other 32 schools in Rochdale have sanitary arrangements which are not only quite insufficient for the number of children using them, but badly sited, in poor repair, old-fashioned and difficult, if not impossible, to keep really clean. It seems little use trying to teach a child personal hygiene when the school it attends is so ill-equipped for the practice of clean habits. Can a child be expected to follow the admirable advice "Now wash your hands" if this means, during playtime, a journey across the playground back into school (perhaps upstairs) to a chipped dark brown washbasin with only a cold tap, possibly no soap and very likely a dirty towel? If every child tried to follow the instruction, any number up to a hundred might be queueing for each washbasin. Unfortunately, children spending formative years in conditions where personal hygiene is difficult or impossible do not easily change their habits later on and the schoolboy or girl with dirty hands may easily become the canteen helper who infects food for large numbers of diners.

Similarly the child attending a school with an obviously inefficient syphon system of closet flushing is not likely to be particular about the condition of the home toilet in later life. It is not suggested that these conditions have arisen recently, but as new schools are built and equipped, the condition of the older and inefficient schools appears so much worse in comparison.

Periodic Medical Inspection. (Table I).

All schools have been visited for periodic medical inspection. One school has been closed (Baillie Street) and two new ones have been added to the list. These are Kirkholt Infant School and High Birch Special School. In the latter, classes have been started in the house, pending the completion of the new school building in the grounds. The School at the Rochdale Children's Orthopaedic Hospital has been taken over by the Rochdale Education Committee.

Total inspections during the year by Medical Officers :—

	1948	1949
Periodic Medical Inspections	4,574	4,632
Special Inspections	820	212
Re-inspections	1,122	1,806
Open Air School (Inspections)	2,362	2,425
Clinic Inspections (New Cases)	2,041	1,855
Clinic Re-inspections	2,413	2,202
Special Examinations and Investigations	706	806
	<hr/>	<hr/>
	14,038	13,938
	<hr/>	<hr/>

	1948	1949
Cases seen by Ophthalmologists	567	770
Cases seen by Aurist (New cases)	463	843
Cases seen by Orthopaedic Surgeon (New cases)...	186	202
Cases seen by Consulting Physician	—	75
	<hr/> 1,216	<hr/> 1,890
Work of School Nurses.	<hr/> <hr/>	<hr/> <hr/>
Dressings at morning clinics	4,100	4,756
Cleanliness Inspections	16,979	18,964
Re-inspections	2,044	3,104
Inspections with Medical Officers		
At School	6,516	6,650
At Clinics	3,531	4,301
Refractions	556	738
Open Air School	2,362	2,425
Aurist's Clinic (Total Attendance)	486	1,855
Home Visits	262	281
	<hr/> 36,836	<hr/> 43,074

The number of school inspections is practically the same as for the previous year. A considerable reduction in the Special Inspections from 820 in 1948 to 212 in 1949, is recorded. It is hoped that this decrease in cases brought out for Special Inspection by the teachers, reflects the higher standards which have been achieved in routine inspection, because of the adequate staffing position. On the other hand, there is a still further increase in the Special Examinations and Investigations carried out at the Clinic due to that switch from general to detailed and individual examinations which has been noted in previous reports and which becomes more noticeable every year. An important part of the Medical Officer's work today consists in the complete investigation of individual children, including physical and mental health, home background, standards of parental care, social attributes and response to school instruction. Now that Psychosomatic conditions are met with so often, such detailed enquiries become increasingly necessary.

An Educational Psychologist, Mr. Edwards, was appointed during 1948. His help has been sought in the investigation of problem cases.

Findings of Medical Inspection (Table II).

We have in some ways come to the limit of what can be done for children's physical health in the present state of our knowledge and resources. Our efforts are best directed now towards dealing with the human failings of ignorance, prejudice and error, and work of this kind is slow, shows no spectacular results and is at times disheartening. An example is in the matter of nutrition. No child in this town today is short of adequate food because of shortage of

money, or absence of essential foods. We do see poorly fed children, but enquiry will show a variety of reasons for this including poor budgeting and marketing, bad training in eating habits and parental indulgence. Sometimes children are badly fed because of the parents' own irrational likes and dislikes, or from simple laziness and lack of interest in good food. Some of this is due to the continuing and apparently increasing employment of married women in industry. It is impossible for such women to do the careful marketing and cooking which are necessary if a family of children is to live well. The midday meal is often eaten at school, but other meals are likely to be bought ready cooked and to consist of the pies, puddings, brawn, cooked meats, trifles and pastries, so abundantly sold in this district. Incidentally, these are just the foods most likely to be contaminated and give rise to gastro-intestinal disturbance. After living on such bought dishes for a time, people unfortunately seem to lose their taste for freshly prepared and raw food, and we are often told at the Clinic that such a child "will not eat a proper dinner". In fact, these children soon become able to enjoy better meals if sauces, pickles and similar things are withheld from them.

Another matter in which a great deal of work needs to be done is the cultivating of a love for fresh air, inside as well as outside. Time after time, when visiting houses even in new estates with the home adjoining open fields, we find tightly closed windows and doors, paper stuffed chimneys and pervading "close" smell of damp clothing and food. Bedrooms are worse than downstairs rooms, where at least fresh air can come in occasionally through the back or front door.

Many of our worst housed people have now been moved into new homes, but others remain in dark overcrowded houses with no amenities. One can feel nothing but sympathy with the conscientious mother living in a damp and dilapidated house with no hot water system, but it is not so easy to sympathise with the woman in a new Council house who by her own laziness or shiftlessness forgoes for her children the benefits of fresh air and cleanliness.

The numbers of such parents form only a small percentage of the whole, but it takes much time, trouble and public expense to deal with them. Of the 380 children whose heads required to be cleansed at the Centre, most have parents in this category.

Nutrition (Table II B.)

There is little change in the figures as compared with those for 1948. There is again a slightly higher percentage, both of the good and the poor categories. Every case in the poor category (165) was investigated and the parents interviewed, and all these children are put on the observation list.

Uncleanliness (Table III).

There is again no reduction in verminous infestation of the head, indeed certain schools have shown a higher percentage of infested children than for

some years. There is a small number of schools which, ever since hygiene inspections began, have consistently shown the highest figures for infestation and general uncleanliness. These are schools where there is a failure on the part of the parents to realise the importance of personal hygiene. The School Medical staff feels that if cleanliness inspections were given up, within a year or two the condition of the children at these schools as regards cleanliness would relapse to that found in 1909. As always, the school doctor and nurse find a co-operative head-teacher their best ally in dealing with parents whose standards of cleanliness are low. Where neither parents nor head-teacher are interested, the work of the doctor and nurse, however devoted, is of little use.

The total number of children examined was 18,964 and 1,915 were found to have verminous infestation of the head. Of these, 57 showed so little improvement after the usual Notices, Home Visits and other forms of persuasion, that Notices for Compulsory Cleansing were given. The comparable figures for 1948 were 16,979, 1,667 and 74.

There is no further change in the amount of scabies occurring in school children. Ninety cases were treated at the Centre (81 in 1948, 296 in 1947).

Cases treated at Centre.

						Complete Treatments	
						1949	1948
Verminous heads	...	...	...	...	...	382	374
Scabies referred by Clinic	...	...	...	...	...	49	59
Scabies referred by family doctor	...	...	...	...	...	41	22

Minor Ailments Clinic (Table IV. Group I).

The total attendances have risen a little during 1949 when the individual defects treated were 1,817 and the total attendances 4,815. The corresponding numbers in 1948 were 1,470 and 4,100. There is no sign of a return to our former figures which during 1947 were 4,558 and 12,278. The chief increase this year was in treatment of ear disease (189 to 361). Our diagnostic and local treatment facilities have improved and we consider that this is the reason for the larger numbers rather than an actual increase in the incidence of ear disease.

Defective Vision and Squint (Table IV. Group II).

Our two Consultant Eye Clinics have continued during the year, one for refraction only, the other for all eye conditions.

Number of children examined by Dr. Scott	...	...	...	396
Number of children seen by Dr. Harry for refraction	...	...	...	374
				770

Of this total 479 children had glasses prescribed and 75 were referred to Manchester Royal Eye Hospital for Orthoptic treatment. Ten cases were children requiring local treatment for conjunctivitis, etc., and in two cases an artificial eye was ordered.

The lack of local provision for Orthoptic Training is much felt since few of the children referred to Manchester for this treatment are in fact able to attend regularly. It is earnestly hoped that local facilities will be provided as soon as possible, as thereby much poor sight in later life would be avoided.

The efficiency of our Eye Service is still a long way behind what it was prior to the inception of the National Health Service Act. There is still a very considerable delay in the provision of glasses although there has been some slight improvement. School children have always been more liable to break their glasses than any other section of the community, but never before have they worn such flimsy and unsuitably fancy spectacles as now. Some children seem to present an O.S.C. 10 Form every few weeks and are found to be wearing dainty and fragile frames quite unfitted for normal everyday wear. The remedy would seem to be to supply a frame of stout construction made to a minimum standard, the choice being allowed only in detail, such as colour. Meanwhile parental vanity leads many, who cannot well afford it, to pay for frames outside the "free" range. The repairs to these are a considerable problem since, when choosing the more expensive frames, parents do not realise their future liability for repair charges.

We are still unable to do the follow-up work which was formerly our normal procedure and it is still not possible for the Ophthalmologist to re-examine a child six months after the original refraction with any likelihood of the glasses having been supplied. Some children's faces have grown so much during the waiting period that the glasses when supplied do not fit and the lenses too are sometimes incorrect by the time the prescription is filled.

We have two blind children and two partially sighted children attending Special Schools.

Ear, Nose and Throat Clinic (Table IV. Group III).

An additional clinic to deal with the large numbers of children suffering from Ear, Nose and Throat conditions, began in January, 1949, and two clinics were held weekly during the whole year, except during the Consultants' holidays. The extra clinic has been found of very great value, especially for children requiring local treatment such as nasal drops, ear toilet, etc., and in reducing the waiting list for consultations. At present no child has to wait more than two or three weeks for a consultation and urgent cases are seen without any delay.

The length of time children wait for operative treatment recommended at this clinic, however, is very disturbing and the position has deteriorated considerably during 1949. At the end of March, 1949, 194 children were awaiting Tonsillectomy, but by 31st December, this figure had risen to 459 with every prospect of a continuing rise. The difficulties of working under these conditions are marked. It is not easy to keep in touch with such large numbers, with the result that many children when sent for have removed or had the operation done elsewhere, perhaps privately. An appreciable amount of our time is taken up

by parents imploring us to expedite the operations and it is not realised that the School Medical Service is now powerless to do anything about the matter.

We have seven deaf and six partially deaf children in Special Schools. Fourteen partially deaf children attend ordinary schools. Two partially deaf children are awaiting admission to Special Schools.

	1949	1948
Children attending Consultant Clinic—		
New Cases	843	415
Re-examinations	1012	447
Total:	1855	862
Cases admitted to Birch Hill Hospital for removal of Tonsils and Adenoids	196	263
Cases admitted to Birch Hill Hospital for Operative Treatment other than Tonsils and Adenoids	—	2
Cases admitted to Hospital with Acute Otitis Media for Penicillin Therapy	3	9
Cases on Waiting List for Tonsils and Adenoids	452	265
Cases referred as out-patients to Rochdale Infirmary for Penicillin Treatment for Acute Ear Conditions	22	—

Audiometric Testing.

The Committee purchased a Western Electric Gramophone Audiometer during the year and just before Christmas, by the courtesy of Professor Ewing, a School Nurse and a Teacher attended the Department for the Education of the Deaf at Manchester University, for instruction in the use of the apparatus.

Systematic audiometric testing is to start early in the new year.

Orthopaedic and Postural Defects. (Table IV. Group IV).

Dr. Batcman, who has taken charge of all Orthopaedic work for children in Rochdale for many years, has retired from the work and held his last clinic on the 27th June, 1949. Dr. Bateman's kindness and co-operation over many years have been much appreciated by the School Medical Service. Hundreds of people in Rochdale remember with gratitude his careful and skilful treatment of their Orthopaedic defects in childhood.

When the Memorial Home, now called the Rochdale Children's Orthopaedic Hospital, began to take Medical as well as Orthopaedic cases, Dr. Bateman undertook the care of both types. Since his retirement it has, however, been necessary to separate the two groups. On the 8th August, 1949, Mr. Gracie, Orthopaedic Surgeon, assumed charge of the Orthopaedic work and on the 2nd September Dr. Maher undertook the care of Medical cases. There was a little confusion during the changeover and our statistics have not been easy to verify.

During 1949, 235 new cases were referred to the clinic, of whom 35 were Medical cases and the rest Orthopaedic. These were diagnosed as follows :—

Scoliosis and Kyphosis	...	...	...	...	...	...	18
Other Postural Defects	...	...	...	...	...	...	29
Flat Foot	...	...	...	...	...	...	75
Knock-knee	...	...	...	...	...	...	26
Deformed Toes	...	...	...	...	...	...	22
Osteomyelitis	...	...	...	...	...	...	6
Paraplegia	...	...	...	...	...	...	5
Valgoid Ankles	...	...	...	...	...	...	3
Synovitis	...	...	...	...	...	...	3
Poliomyelitis	...	...	...	...	...	...	3
Schlatter's Disease	...	...	...	...	...	...	2
Debility	...	...	...	...	...	...	28
Asthma	...	...	...	...	...	...	5
Rheumatism and Endocarditis	...	...	...	...	...	...	2
Miscellaneous	...	...	...	...	...	...	8
							<hr/>
							235
							<hr/>

Apart from the delicate children referred from the School Clinic, Tubercular and Pre-tubercular children are referred to this Clinic from the Chest Clinic. At the end of the year 60 children were in-patients at the Rochdale Children's Orthopaedic Hospital, 43 being Medical cases and 17 Orthopaedic (Physically Handicapped). We had also one Physically Handicapped child at Biddulph Orthopaedic Hospital and three at the Open Air School.

As in Ophthalmic and Ear, Nose and Throat work, we are experiencing difficulty in dealing with the preventive side of Orthopaedics since the National Health Service Act came into operation with its emphasis on the curative aspect. We come across many children in school with very early signs of Flat Foot, Hammer Toe, Knock-knee and other Postural Defects, slight, but obvious to the trained observer. Orthopaedic Surgeons at present have not the time to spend in dealing with such cases, yet many of these children eventually do come to need the attention of an Orthopaedic Surgeon.

An adequate School Medical Service should include facilities for dealing with these conditions by Physiotherapy, but at present we have no such facilities, nor does it seem likely that we shall enjoy them in the near future. Physiotherapists are few and far between and newcomers are rapidly absorbed by the curative services. The need for economy bears harder on the Preventive Services.

Child Guidance and Speech Therapy (Table IV. Group V).

We have not been able to re-instate arrangements locally for either Child Guidance or Speech Therapy. A few of our children most in need of Speech Therapy attend the Royal Manchester Children's Hospital in Manchester.

Dental Inspection and Treatment (Table V). Report of H. P. Gledsdale, L.D.S., Senior Dental Officer.

During the year 41 school departments were visited for Routine Dental Inspection, 8,474 children being examined and 3,680 referred for treatment. An additional 1,478 attending for treatment as "Specials" were also inspected.

The 3,445 children receiving treatment made 5,197 attendances for various operations, including the extraction of 209 permanent and 2,942 temporary teeth, and 3,719 teeth were conserved.

The Service continues to be unable to function adequately owing to the lack of a Dental Officer and although every effort is being made to minimise the serious damage caused by this, arrears are steadily accumulating and it is impossible to provide the continuous conservative treatment which is so essential a feature of the School Service. The Senior Dental Officer has managed to reduce some of the arrears in the Balderstone area by re-opening the Clinic there, but this has only been accomplished by reducing the frequency of inspections in No. 1 Area from once in twelve to once in eighteen months.

The number of children to be cared for continues to increase and the acceptance rate is high, few children appear to have treatment except at the School Clinic and a depleted staff is thus endeavouring to cope with the bulk of the child population of the town.

The number of cases attending as "Specials" for the relief of pain, continues to rise (1,478 as against 694 in 1947). The time spent on these could much more profitably be utilised in routine conservative treatment. The cause of this increase is the shortage of staff and the fact that few children can receive treatment except at the School Clinics.

Cases previously referred to the Manchester Dental Hospital for Orthodontic Treatment can, owing to the long waiting list, no longer be accepted and provision ought to be made for these cases locally. This cannot be done with the existing staff.

The maintenance of an adequate Service is dependant upon full staffing and whilst at the moment the damage has been minimised as far as possible, there is a danger of the benefits of years of continuous conservative treatment being dissipated and irreparable damage being done to the children's dentition.

					<u>Inspection</u>	<u>Treatment</u>	<u>Total</u>
Sessions	...	...	...	...	83	951	1,034
					<u>Routine</u>	<u>Specials</u>	<u>Total</u>
Attendances	...	...	...	...	3,719	1,478	5,197
					<u>Temporary</u>	<u>Permanent</u>	<u>Total</u>
Extractions	...	...	...	...	2,942	209	3,151
Fillings	...	...	...	...	388	3,331	3,719
Other Operations	...	...	...	...	497	1,184	1,681
General Anaesthetics	...	...	...	...	—	359	359

Age Groups Inspected.

3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
91	324	780	812	679	716	685	861	885	791	790	720	180	86	38	22
Total 8,474, plus "Specials" (Not age classified) 1,478 = 9,952.															

Infectious Disease.

The following cases were notified from the Schools :—

								<u>1949</u>	<u>1948</u>
Scarlet Fever	...	...	...	...	...	...	...	143	94
Diphtheria	...	...	...	...	...	...	...	—	2
Measles	...	...	...	...	...	...	...	331	384
Whooping Cough	...	...	...	...	...	...	...	75	155
Chicken Pox	...	...	...	...	...	...	...	61	109
German Measles	...	...	...	...	...	...	...	—	27
Poliomyelitis	...	...	...	...	...	...	...	2	1
Tubercular Meningitis	...	...	...	...	...	...	...	1	—
								<u>613</u>	<u>772</u>

Day Open Air School.

The School has remained full throughout the year, each of the 120 places being taken up immediately a vacancy occurred. At the end of the year there were 112 delicate children on the Register, three physically handicapped and five mal-adjusted. There were 72 children discharged during the year because their condition had improved sufficiently for them to return to ordinary school. The following table shows the condition from which these children were originally suffering :—

							Boys	Girls
Malnutrition	...	...	...	...	...	...	5	9
Rheumatism	...	...	...	...	...	...	1	1
Pre and Post Tuberculosis	...	...	...	...	...	...	1	4
Non-Tubercular Chest Conditions	...	...	...	...	...	...	8	4
Nervous Conditions	...	...	...	...	...	...	6	6
Anaemia and Debility	...	...	...	...	...	...	4	11
Chronic Blepharitis	...	...	...	...	...	...	1	—
Orthopaedic Defects	...	...	...	...	...	...	1	—
Chronic Ear Trouble	...	...	...	...	...	...	1	1
Cases for Observation	...	...	...	...	...	...	5	3
Total							33	39

In addition, three girls and one boy attained school-leaving age. The girls had been admitted for Asthma, Malnutrition and Debility, and the boy for Nervousness and Recurrent Herpes.

The eight children admitted for observation showed the usual variety of symptoms and signs.

1. Girl, aged 8 years : Complaints of cough, tiredness and "not being so well". No real defect was ever found, but she was better when she left.
2. Girl, aged 11 years : Restless, excitable, heedless and fretful. Living with fosterparents. Backward. Nervous condition settled down.
3. Girl, aged 11 years : Stomach pains. Father a mild Epileptic and mother very worried. This girl eventually had an Appendicectomy and did very well afterwards.
4. Boy, aged 10 years : Family doctor requested admission to Open Air School, boy said to be restless, inattentive, excitable and uncontrolled. Was found to have an I.Q. of 62, and put on waiting list for special school for educationally sub-normal children (High Birch).
5. Boy, aged 11 years : Thought to be backward and/or to have poor vision. Found to be very tense, a quiet boy accustomed to country life and bewildered with town bustle. Improved very much.
6. Boy, aged 11 years : Under-nourished for no ascertainable reason. Improved very much and was of average physique on discharge.
7. Boy, aged 10 years : Long history of hospital treatment and not ready for ordinary school life. Improved, except for his backwardness and eventually was fit to return to an Elementary School.
8. Boy, aged 12 years : Said to have "bad nerves" to be "everlastingly crying", and to be a poor mixer with other children. He did well at Brownhill, gained 9½ lbs. in weight and was in good condition on discharge.

When the Open Air School was built it was a modern building and the auxiliary arrangements (lavatories, etc.) were adequate for the number of children on the register, which was 75. For some time now we have had 120 children in the school, but the only extra provision made was class-room accommodation, which is adequate. The need for more toilet provision and an assembly hall is very much felt, and the rest room accommodation is not now all that could be desired. The close proximity of the large kitchens which supply meals to all school canteens causes a good deal of unavoidable noise during the time the children are supposed to be asleep.

Educationally Sub-Normal Children.

Although work on the new school at High Birch was begun during 1949 and was well advanced by the end of the year, it was obvious that the building would not be ready to receive children until late in 1950, so several of the rooms in the house were cleaned and furnished as classrooms, recreation rooms, dining room, and for administration. On the 16th May, 1949, twelve boys and three girls were admitted. Two others were offered places, but the parents refused.

The ages of these children varied from 10 yrs. 10mths. to 13yrs. 2 mths., the average age being twelve. The I.Q.'s. varied between 60 to 87, the average being 75. At the first medical inspection on the 23rd May, the children were found rather below average in physique and with a higher incidence of physical defect, as was expected. Six of the fifteen had verminous heads.

All the children have dinner at school. The good plain regular meals and the airy situation of the school, which is in an ideal position, together with the suitable teaching, soon made an appreciable improvement in the children's physical condition, appearance and spirits. In spite of the fact that the school started in such a small way with no modern educational facilities, the children rapidly got rid of that neglected and lost look, so often observed in sub-normal children attending an ordinary school. Nearly all the children are from homes where both parents go out to work and interviews with these parents are not easy to arrange.

At the beginning of September another teacher was engaged and a further fifteen children admitted so that at the end of the year there were thirty children on the register.

We had, at the end of the year, eleven children attending residential special schools for educationally sub-normal children.

The work of ascertainment of sub-normality continues and altogether 125 examinations were made by the Assistant School Medical Officer for the purpose of assessing intelligence. Four boys and two girls were notified to the Local Authority as being ineducable and two boys and six girls as needing supervision after leaving school.

Provision of Meals.

During 1949 the kitchens and dining rooms indicated below were completed and brought into use :—

School	Provision
Meanwood	—Kitchen and Dining Room—375 meals (2 sittings).
Kirkholt County Infants West	—Kitchen and Dining Room—150 meals (2 sittings).

By the end of 1949 the work on the dining room and scullery (375 meals—2 sittings), for the Lowerplace School was well advanced and it is anticipated that the building will be completed early in January, 1950.

Work was commenced on the kitchen and dining room for the Spotland School and the building should be ready for use by May, 1950.

Negotiations for the acquisition of a site for the kitchen and dining room for the Oakenrod School are being carried out. The negotiations for the acquisition of a suitable site for the kitchen and dining room for the Newbold School have been completed.

In connection with building work the Ministry of Education stated during 1949 that, in order to enable resources to be concentrated on the most vital work, it is necessary to postpone until further notice all new buildings for the school meals service at existing schools.

Arrangements have been made during 1949 for the pupils of the Fleece Street, Boys' High and Technical Schools, to have separate canteens in Lea Hall, Smith Street.

There are 47 canteens in use for school meals purposes and the Authority now has a producing capacity of approximately 6,500 meals per day (i.e. 65% of the school population), as against the proposed capacity of 75% of the school population.

By December, 1949, 28 women supervisors were employed in school canteens, together with four assistant supervisors, and applications for the appointment of additional supervisors and assistants will be considered early in 1950. A further 40 women supervisors or assistants are still required to meet the proposed establishment in each school canteen.

During 1949, 42,191 free meals were supplied (27,892 in 1946 ; 25,358 in 1947 ; 42,730 in 1948). The number of dinners supplied for which payment was made was 812,055 to children and 31,390 to teachers, etc. (644,220 in 1946 ; 736,321 in 1947 ; 853,818 in 1948). These figures do not include meals supplied to pupils at the Open Air School or at the Nursery Schools.

National Society for the Prevention of Cruelty to Children.

The Department has again enjoyed the full co-operation of the Society in helping neglected children. Inspector Mitchell gives the following report on cases of child neglect reported to his Society by this Department during 1949 :—

"During the year four cases were reported to me and these cases affected the lives of twelve children and were cases of general neglect where the children were allowed to be bodily dirty, verminous, poorly clad or ill shod.

Investigation of the homes of these children disclosed conditions of a standard below what could be considered necessary for healthy and normally happy children.

The conditions in one of the homes, which concerned the welfare of three of the children, were found to be appalling. These children were, with the parents' consent, removed to a Home for a period of three months, until alternative and more suitable accommodation could be provided.

In all cases the parents after being warned have co-operated in seeing that there has not been a repeat of adverse conditions.

During the year you and your staff have further assisted this Society in its work when investigations were being made in three other cases of child neglect, affecting the lives of a further eight children."

Co-operation with Other Voluntary Bodies.

Again the St. Anne's Convalescent Home and the Moorland Home have given much help to children needing a holiday.

Employment of Children and Young Persons.

The number of school children medically examined prior to registration as part-time workers was 207 during 1949.

Other Medical Examinations.

The Assistant School Medical Officers examined 144 persons in connection with the Corporation Sickness Scheme and the requirements of the Local Government Superannuation Act, 1937. They also made 137 special examinations of children and young persons who were delinquent, or in some other way considered to be "problem" children.

Nursery Schools and Meanwood Nursery Class.

The Nursery Schools were inspected on an average every three weeks and 723 medical inspections (new entrants and re-inspections) were made during the year.

Children of sub-standard nutrition and cases needing special medical treatment were frequently re-inspected. The standard of nutrition amongst the children was found to be very satisfactory.

264 (36.5%) were classified as good nutrition ;

441 (61.0%) were of average nutrition ;

18 (2.5%) were of poor nutrition.

Tonsils, Adenoids and Nasal Catarrh formed one of the chief groups of complaints, the other being Orthopaedic defects of major character and degree.

Of the 168 cases referred for special treatment, 51 were for Tonsils and Adenoids and its accompanying Nasal Catarrh, the others referred were for the following reasons :—

Orthopaedic Defects	...	...	...	...	...	...	48
Dental Caries	...	...	...	...	...	...	31
Defects of the Eyes	...	...	...	...	...	...	6
Defects of the Ears	...	...	...	...	...	...	4
Ultra Violet Ray Treatment	...	...	...	...	...	...	13
Miscellaneous	...	...	...	...	...	...	15

There were 8,749 examinations made by the Health Visitors for infestations with nits and vermin. Of these examinations 8,258 showed children's heads to be clean, i.e. 94.38%, which is a great improvement over last year's figure of 72%.

Diphtheria immunisation was carried out in all the Nursery Schools for fresh entrants and those requiring booster doses. Since October, Whooping Cough Immunisation has been carried out for those children whose parents requested this form of prophylaxis.

Diphtheria Immunisation.

The usual practice of visiting one half of the schools in the Spring and the other half in the Autumn was continued. In addition, the Saturday morning Clinic at Baillie Street remained open for School children as well as for their younger brothers and sisters.

During the year 820 children of school age received a full course of immunisation and 866 children previously immunised received a reinforcing injection. These show a very substantial increase as compared with 1947, in which year the corresponding figures were 494 full courses and 571 re-inforcing doses.

Cost of Medical Inspection.

The cost of this Department from the 1st April, 1948, to the 31st March, 1949, was as follows :—

	£	s.	d.
Salaries	7,445	2	10
Printing, Stationery, Postage and Telephones	276	4	6
Drugs, Materials, Apparatus	614	17	10
Hospitals, Nursing Associations	653	15	10
Travelling	148	17	7
Rent, Rates, Taxes and Insurance	769	8	6
Upkeep of Premises	22	10	11
Fuel, Light and Cleaning	115	15	2
Cleansing of Pupils	419	12	6
Conveyance of Children	82	9	6
Other Expenses	185	3	7
Services of Education Psychologist	439	16	3
National Insurance—Employer's Contribution	101	19	10
	<u>£11,275</u>	<u>14</u>	<u>10</u>

MEDICAL INSPECTION RETURNS.

YEAR ENDED 31ST DECEMBER, 1949.

TABLE I.

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Special Schools).

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the Prescribed Groups :—

Entrants	...	...	...	...	...	...	...	1,295
Second Age Group (11 +)	...	...	...	...	...	...	...	1,307
Third Age Group (14 +)	...	...	...	...	...	...	...	820
Total								3,422

Number of other Periodic Inspections	1,210
(7 + and others)							

Grand Total	4,632
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B.—OTHER INSPECTIONS.

Number of Special Inspections	212
Number of Re-Inspections	1,806
...	...	...	...	...	Total	...	2,018

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin).

Group	For defective vision (excluding squint).	For any of the other conditions recorded in Table IIA.	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	22	225	236
Second Age Group ...	228	198	410
Third Age Group ...	118	86	198
Total (prescribed groups)	368	509	844
Other Periodic Inspections	136	212	322
Grand Total	504	721	1,166

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

Defect Code No.	Defect or Disease (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of Defects		No. of Defects	
		Re- quiring Treat- ment (2)	Requiring to be kept under observation but not requiring Treatment (3)	Re- quiring Treat- ment (4)	Requiring to be kept under observation but not requiring Treatment (5)
4	Skin... ..	39	44	9	7
5	Eyes—a. Vision	504	252	254	231
	b. Squint	68	58	25	22
	c. Other	13	12	6	3
6	Ears—a. Hearing... ..	9	12	8	11
	b. Otitis Media	19	18	6	14
	c. Other	4	6	2	2
7	Nose or Throat	220	503	190	162
8	Speech	17	40	19	42
9	Cervical Glands	1	49	2	22
10	Heart and Circulation	1	20	2	17
11	Lungs	1	26	—	18
12	Developmental—				
	a. Hernia	4	10	2	8
	b. Other	2	14	—	7
13	Orthopaedic—				
	a. Posture	18	110	18	59
	b. Flat foot	58	121	11	13
	c. Other	58	126	24	16
14	Nervous System—				
	a. Epilepsy	—	1	—	2
	b. Other	2	10	—	3
15	Psychological—				
	a. Development	26	67	9	52
	b. Stability	12	8	8	6
16	Other	8	28	8	29

TABLE II.—(continued).

B.—Classification of the General Condition of Pupils Inspected during the year in the Age Groups.

Age Groups	Num- ber of Pupils In- spect- ed	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	1295	66	5.09	1164	89.88	65	5.01
Second Age Group ...	1307	82	6.27	1188	90.89	37	2.83
Third Age Group ...	820	34	4.14	771	94.02	15	1.82
Other Periodic Inspections	1210	63	5.20	1099	90.82	48	3.96
Total ...	4632	245	5.28	4222	91.14	165	3.56

TABLE III.—Infestation with Vermin.

(i)	Total number of examinations in the schools by school nurses or other authorised persons	18,964
(ii)	Total number of <i>individual</i> pupils found to be infested	1,915
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	1,915
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	57

TABLE IV.

GROUP I.—Minor Ailments (excluding Uncleanliness, for which see Table III.)

(a)	Number of Defects treated or under treatment during the year
SKIN—	
Ringworm—Scalp—	
(i) X-Ray treatment	—
(ii) Other treatment	1
Ringworm—Body—	8
Scabies	49
Impetigo	60
Other skin diseases	32
Eye Disease	
(External and other, but excluding errors of refraction, squint and cases admitted to hospital)	189
Ear Defects (excluding serious diseases of the ear)	361
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains, etc.)	1,117
Total	1,817
Total number of attendances at Authority's minor ail- ments clinic	4,815

GROUP II.—Defective Vision and Squint. (excluding Eye Disease treated as Minor Ailments—Group I.)

Errors of Refraction (including squint)	...	...	...	...	770
Other defect or disease of the eyes (excluding those recorded in Group I)	...	...	...	...	12
Total	...	...	...	...	782
<hr/>					
No. of Pupils for whom spectacles were :—					
(a) Prescribed	...	...	...	...	479
(b) Obtained	...	...	...	...	215

GROUP III.—Treatment of Defects of Nose and Throat.

Received operative treatment—					
(a) for adenoids and chronic tonsillitis	...	...	...	...	196
(b) for other nose and throat conditions	...	...	...	...	—
Received other forms of treatment	...	...	...	...	289
Total	...	...	...	...	485
Received treatment to ears	...	...	...	...	270

GROUP IV.—Orthopaedic and Postural defects.

(a) No. treated as in-patients in hospitals or hospital schools...	...	28
(b) No. treated otherwise e.g. in clinics or out-patient departments	...	235

GROUP V.—Child Guidance Treatment and Speech Therapy.

No. of pupils treated (a) under Child Guidance arrangements	...	—
(b) under Speech Therapy arrangements	...	—

TABLE VI.
HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL
SCHOOLS OR BOARDING IN BOARDING HOMES

	(1) Blind (2) Par- tially sighted		(3) Deaf (4) Par- tially Deaf		(5) Deli- cate (6) Physi- cally Handi- capped		(7) Educa- tionally subnor- mal (8) Malad- justed		(9) Epi- leptic	Total 1—9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the calendar year										
(a) Handicapped Pupils newly placed in special schools or homes	0	0	3	4	62	3	32	2	1	107
(b) Handicapped pupils newly ascertained as requiring education at special schools or boarding in Homes ...	0	0	0	2	35	6	125	2	3	173
On or about Dec. 1st										
(c) Number of Handicapped Pupils from the area ...	0	1	0	1	105	9	29	2	0	147
(i) attending special schools as day pupils or boarding pupils ...	2	1	7	5	0	1	11	0	3	30
(ii) Boarded in Homes ...	0	0	0	0	0	0	0	2	0	2
(iii) attending assisted schools	0	0	0	0	0	0	0	0	0	0
TOTAL (c) ...	2	2	7	6	105	10	40	4	3	179
(d) Number of Handicapped pupils requiring places in special schools or homes but remaining unplaced ...	0	0	0	14	73	21	327	2	3	440
(e) Number of Handicapped pupils receiving home tuition	0	0	0	0	0	0	0	0	0	0

Number of children reported during the Calendar year under Section 57 (3)—6.
and under Section 57 (4)—7 of the Education Act, 1944.

